

**FOX Sports,
Hillsborough County Parks, Recreation &
Conservation,
& R.A.W. UNITED, INC.
*proudly present:***



MIKE WITMER MEMORIAL OPEN

**JUNE 19-20, 2010
JACKSON SPRINGS RECREATION CENTER
TAMPA, FLORIDA
321-505-1194**

rawunited@cfl.rr.com

2010 MIKE WITMER MEMORIAL OPEN: GENERAL INFO

- Meet Director:** Spero Tshontikidis * (321) 505-1194 * rawunited@cfl.rr.com
- Venue:** Jackson Springs Recreation Center * 8620 Jackson Springs Road * Tampa, FL 33615
- Schedule of Events:**
- | | |
|--------------------------------|---------------------|
| 06/18 Early Weigh-Ins | 5:00 pm to 7:00 pm |
| 06/19 Contest Weigh-Ins | 8:00 am to 8:45 am |
| Rules Clinic, Session I | 9:00 am to 9:15 am |
| Flight A Warm-Ups | 9:15 am to 10:00 am |
| Lifting Starts | 10:00 am |
- (Times are the same for Sunday lifters)*
- Travel Information:** Directions to the meet site can be obtained at mapquest.com. The meet site address is: Jackson Springs Recreation Center * 8620 Jackson Springs Road * Tampa, FL 33615
- Lodging Information:** InterContinental Tampa * 4860 W. Kennedy Blvd. * Tampa, FL 33609 * 800-235-4670
- Rules:** R.A.W. United rules will govern this contest. Rules of performance will be reviewed at the Rules Clinic and can be found at www.rawunited.org.
- Age Groups:**
- | | |
|------------|--------------------------|
| Kids: | 7-under, 8-9 |
| Youth: | 10-11, 12-13 |
| Teenage: | 14-15, 16-17, 18-19 |
| Junior: | 20-24 |
| Senior: | 25-29, 30-34 |
| Submaster: | 35-39 |
| Master: | 40-44, 45-49, 50-54, etc |
- Weight Classes:**
- Men's: **66, 77, 88, 97, 105, 114, 123, 132, 148, 165, 181, 198, 220, 242, 275, 308, 308+**
- Women's: **66, 77, 88, 97, 105, 114, 123, 132, 148, 165, 181, 198, 198+**
- Divisions/Uniform:**
- IRONMAN - tested; non-supportive singlet, belt
- RAW - non-tested; non-supportive singlet, belt, wrist wraps, non-fastening knee sleeves
- Awards/Entry Fees:**
- \$50.00 Option: Entry includes customized, FOX Sports DVD and 8" x 10" photograph
- \$75.00 Option: Entry includes customized, FOX Sports DVD, 8" x 10" photograph, and award
- Team Fees:** \$50.00 Team Fee: Men's, Women's, and Mixed
- Teams** must consist of at least five lifters and no more than 10 lifters (no more than two lifters in the same weight class). **Mixed teams** can enter a maximum of 5 men and 5 women.
- Membership:** Lifters not registered with R.A.W. United must purchase a 2010 membership card (\$10.00, payable to: R.A.W. United, Inc.)
- Entry Deadline:** Completed entry form and fees must be received (not postmarked) no later than **Saturday, May 29, 2010**. This allows for a more organized contest; absolutely no late entries will be accepted!
- Contest Packets:** All lifters will receive a contest packet immediately following the **May 29 entry deadline**. Packets include the finalized contest roster, time schedule, order of lifting, and flights.
- Questions:** Call Spero at **(321) 505-1194**.

ATHLETES MUST COMPLETE AND SIGN THE RAW RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND THE PARENTAL CONSENT AGREEMENT ("AGREEMENT")

Release, Waiver of Liability, Assumption of Risk, Indemnity, and Parental Consent Agreement ("agreement")

In consideration of being permitted to participate in a R.A.W. United ("activity") I, my personal representatives, assigned heirs, and next of kin: **ACKNOWLEDGES**, agree, and represent that I understand the nature of the activity and that I am qualified, in good health and in proper physical condition to participate in such activity. I further agree and warrant that if at any time I believe conditions to be unsafe; I will immediately discontinue further participation in the activity.

FULLY UNDERSTAND that (a) **ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("Risks")**: (b) these Risks and dangers may be caused by my own actions or in actions of others participating in the activity, the condition in which the activity takes place, or **THE NEGLIGENCE OF THE "RELEASES" NAMED BELOW**: there may be **OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES** either not known to me or not readily foreseeable at this time: and **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** I incur as a result of my participation or that of the minor in the activity.

HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE R.A.W. United, Inc., "THE GYM," Spero S. Tshontikidis, Bill Beekley, Hillsborough County Parks & Recreation, Jackson Springs Recreation Center, any and all contest staff members, related affiliated and subsidiary companies of each, as well as the officers, directors, agents, employees, and assigns of each, coaches officials, administrators, members, volunteers, participants, sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, and any other party indemnified and held harmless by R.A.W. United, Inc., (each considered one of the "RELEASES" herein) **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE** that if, despite this **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I**, or anyone on my behalf, makes a claim against any of the Release's, **I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASES** from any litigation expense, attorney fees, loss, liability, damage, or cost which may incur as a result of such claim.

Drug Testing Statement, Agreement, and Release of Liability (Does not pertain to RAW Division Lifters)

I give my word as an athlete that I have not utilized any type of strength-inducing chemicals (anabolic steroids, growth hormone, etc.) since September 11, 2001. **In consideration of the acceptance of this entry, I agree to any test method deemed necessary by the meet director(s) and that the results of said testing method which the meet director(s) and/or sponsors of this meet use to detect the presence of the strength inducing drugs may be released to any third party(ies) and I generally and specifically waive any right to privacy if any, related there to.** I hereby waive and release, intending to be legally bound for myself, my executors, administrators, and heirs, all rights and claims for damages I may have against R.A.W. United, Inc., "THE GYM," Spero S. Tshontikidis, Bill Beekley, Hillsborough County Parks & Recreation, Jackson Springs Recreation Center, any and all contest staff members, and all parties associated with the **2010 Mike Witmer Memorial Open** as a result of testing positive for the utilization of strength-inducing chemicals. **My entry into the 2010 Mike Witmer Memorial Open constitutes my consent to the testing procedures; and, if any such results test positive, I understand that I shall be disqualified from the pertinent competition and suspended for a period to be fixed by the meet director(s).** I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Printed name of participant: _____ Phone: () _____
Participant's signature (parent must sign below if under age 18): _____ Date: _____

MINOR'S RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE. I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

Printed name of parent or guardian: _____ Phone: () _____
Address: _____
Parent signature (only if participant is under age 18): _____ Date: _____