



# Titans of Toccoa



Date: September 14<sup>th</sup>, 2019

Location: TBD

Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ DoB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What gym do you train at? \_\_\_\_\_

Have you competed in a lifting competition before? \_\_\_\_\_

Weight: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Please circle the lift(s) or package that you wish to compete in below:

Squat	Bench Press	Deadlift	Overhead Press
Powerlifting Package (Squat – Bench Press – Deadlift)		CrossFit Total Package (Squat – OH Press – Deadlift)	

**Individual Lifts are \$20 each**

**Packages are \$45 each**

Please Circle the Category you belong in for the competition:

**Gender:**                      Male                      Female

**Division: Please circle the age/weight category that you fall into**

<b>Age:</b>	<b>Featherweight</b>	<b>Lightweight</b>	<b>Middleweight</b>	<b>Welterweight</b>	<b>Heavyweight</b>
Teen Titans (14-17)	135	155	175	215	216+
Titans (18-34)	155	185	205	225	226+
Legends (35+)	155	185	205	225	226+

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**Liability Waiver**

In accordance with the character values of faith, honesty, respect, caring, and responsibility, I/we verify that the information provided on this application is accurate. This includes, but not limited to the selection of membership category and covered individuals. I/We further agree to adhere to the rules of Square One Fitness. If these rules are not followed, I/we agree that Square One Fitness reserves the right to take necessary disciplinary action, including temporary or permanent suspension of membership and total ban from admittance to use the facility.

By submitting this application, I/we agree that Square One Fitness may photograph or videotape me/us, and Square One Fitness may use those photographs or video footage for its marketing purpose. I/we release Square One Fitness from any claim related to that use, waive all claims for myself/ourselves, my/our heirs and assignees against the individual Square One Fitness staff persons and Square One Fitness. I/We understand that participation in fitness and sports activities carries certain risks. I/We accept all risks of injuries as a result of my/our participation in Square One Fitness activities, and I/we fully indemnify and hold harmless Square One Fitness, its owners, employees and volunteers. The undersigned hereby releases, waives, discharges and covenants not to sue Square One Fitness, it's owners, employees, and agents from all liability to the undersigned, his personal representatives, assigns, heirs and next of kin for loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with Square One Fitness without respect to location.

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Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For participants under the age of 17