



# 2010 Membership Application

for residents of Ontario

Required if competing Jan 1,2010 - Dec 31,2010 (Includes Newsletter)



Becoming an OPA member automatically entitles you to a CPU (Canadian Powerlifting Union) membership. The CPU is affiliated with the IPF (International Powerlifting Federation).

**PLEASE PRINT. Complete all areas.  
Membership Fees are non-refundable.**

Who can become an Ontario Powerlifting Association Member?

- Residents of Ontario can be full members of the Ontario Powerlifting Association. Lifters in other provinces must register with the association in their province
- Non-residents of Canada must register with the CPU Registration Chairperson directly
- Any person from anywhere can be an Associate member.

Are you a new Member?

Name: \_\_\_\_\_  
First Name Middle Initial Last Name

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

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

→ PLEASE PRINT – Complete all areas / Membership Fees are non-refundable

Insurance waiver form that MUST accompany the membership form. Note that there is a separate version of this form for Minors to be signed by the parent/guardian.

**\*\*\* Both the Waiver and Membership form must be signed before a CPU card can be issued \*\*\***

**Type of Membership (Check only one)**

Regular: \$65.00/Regular Sub-Junior \$45.00 or  Special Athlete: \$45.00 or  Associate: \$30.00

Note: All members receive the OPA Newsletter several times per year. Regular and Special Athletes receive a CPU card which entitles entry into IPF affiliated contests.

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  M or  F Level:  Novice  Intermediate  Senior  
DD / MM / YYYY

Categories:  Open  Blind  Special Athlete  Other \_\_\_\_\_  
(check all that apply)  Sub Junior  Junior  Master I  Master II  Master III

Affiliated OPA Club: \_\_\_\_\_ or  Unattached

Note: In order to represent an affiliated OPA club, the lifter must train with the club regularly (at least once a week) Notify the Registration Chairperson if you are changing clubs. You can only compete for the club that is indicated above.

As a member of the Ontario Powerlifting Association, I agree to follow and obey all rules, regulations, and drug testing procedures as specified in the Ontario Powerlifting Association Constitution and Bylaws (available on the OPA website and upon request). In order to have the right to a Provincial, National or International record, it will be required of me to undergo a drug screening test before I may be declared the record holder.

**Privacy:**

The Ontario Powerlifting Association collects and uses your personal information primarily for the purposes of: a. registration activities associated with the Ontario Powerlifting Association, the Canadian Powerlifting Union and affiliates; b. mailing of periodic newsletters; c. Posting contest results on the website and in the newsletter; d. insurance.

I understand that by joining the Ontario Powerlifting Association, I am granting permission to use my likeness, voice and words on television, radio, films, newspapers, newsletters, on the internet and any other media. As a competitor, I further understand that my age, bodyweight and competition results will be available for scrutiny and posting at competitions as well as in the above described media.

I consent to the information above being made available to our members for networking (e.g. membership lists, newsletters, etc). Only the information that is necessary (and nothing additional) will be shared. This information will not be given out to any other organization.

**Medical:**

Should there be an instance during a club practice or competition where I am not medically able to determine emergency medical care for myself, I authorize the Ontario Powerlifting Association or Ontario Powerlifting Club officials to take such measures and arrange for such medical and hospital treatment as they may deem advisable for my health and well-being.

Signature (Required): \_\_\_\_\_

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

(Parent/Guardian if under 18)

Send application & cheque/money order to:  
Ontario Powerlifting Association  
c/o Marlene Moore, 9 Old Oxford Road  
St Catharines, ON L2M 2J7

Make Cheque or Money Order payable to:  
Ontario Powerlifting Association

\*Allow 4-6 weeks for CPU Cards to be processed.  
**Registration will not be accepted on the day of a contest.**  
Rev: 01/07 v1.0

## ACKNOWLEDGEMENT OF RISK AND RELEASE OF LIABILITY

For Participants *Under the Age of Majority* in the Province or Territory in which the Athletic Activities are Provided by the Organization  
**WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS, READ IT CAREFULLY!**

Every Person MUST Read and Understand this Waiver Before Participating in Athletic Activities

The following waiver of all claims, release from all liability, assumption of all risks and other terms of this agreement are entered into by me on behalf of the Minor Participant (the "Minor") with and for the benefit of **Ontario Powerlifting Assoc.**, its directors, employees, volunteers, coaches, officials, business operators, agents and site property owners or Occupiers (the "Organization"). Occupiers is defined in accordance with the definition of Occupiers contained in the Occupiers Liability legislation applicable to the Province or Territory in which the Athletic Activities are provided by the Organization.

- 1) I am the Parent/Guardian of the Minor and am executing this waiver on behalf of the Minor in my capacity as Parent/Guardian and with the intent that this waiver be binding on myself and the Minor for all legal purposes.
- 2) "Athletic Activities" includes but is not limited to contact and non-contact sports, fitness activities, personal training instruction and activities, use of facilities, and fitness programs and services provided to the Minor by the Organization.
- 3) I am aware that there are inherent and significant risks ("Risks") associated with the participation in Athletic Activities. I am aware that those Risks include but are not limited to the potential for serious personal injury caused by any event or any condition of the facility or equipment where Athletic Activities are provided by the Organization and health risks such as transient light-headedness, fainting, abnormal blood pressure, chest discomfort, muscle cramps or soreness, and nausea. I understand the Risks are relative to the Minor's state of fitness and health (physical, mental and emotional), and to the awareness, care and skill with which the Minor conduct him or herself while participating in Athletic Activities.
- 4) I freely accept and fully assume all responsibility for all Risks and possibilities of personal injury, death, property damage or loss resulting from the Minor's participation in Athletic Activities. I agree that although the Organization has taken steps to reduce the Risks and increase safety of the Athletic Activities, it is not possible for the Organization to make the Athletic Activities completely safe. I accept these Risks and agree to the terms of this waiver even if the Organization is found to be negligent or in breach of any duty of care or any obligation to me or the Minor in the Minor's participation in Athletic Activities.
- 5) I acknowledge on behalf of the Minor the Minor's obligation to immediately inform the nearest employee or others of the Organization if he or she feels any pain, discomfort, fatigue or other symptoms that he or she may suffer during and immediately after his or her participation in Athletic Activities. I understand the Minor may stop participation at any time, and I may be requested to stop by an employee or others of the Organization who observes any symptoms of distress or abnormal response.
- 6) In addition to consideration given to the Organization for the Minor's participation in Athletic Activities, I and my heirs, next of kin, executors, administrators, and assigns, as well as the Minor and his or her heirs, next of kin, executors, administrators, and assigns, (collectively our "Legal Representatives"), agree:
  - a) To waive all claims that I or the Minor have or may have in the future against the Organization;
  - b) To release and forever discharge the Organization from all liability for all personal injury, death, property damage, or loss resulting from the Minor's participation in the Fitness Activities due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error of judgment of the Organization; and
  - c) To be liable for and to hold harmless and indemnify the Organization from all actions, proceedings, claims, damages, costs demands including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Minor's participation in Athletic Activities.
- 7) I agree that this waiver and all terms contained within are governed exclusively by the laws of the Province or Territory of Canada in which the Athletic Activities are provided to me by the Organization. I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory. Any litigation to enforce this waiver must be instituted in the Province or Territory in which the Athletic Activities are provided by the Organization.
- 8) I confirm that I have had sufficient time to read and understand each term in this waiver in its entirety, and have agreed to the terms freely and voluntarily. I understand that this waiver is binding on myself as Parent/Guardian, the Minor and our Legal Representatives.

Please Print Clearly

Please Initial the box after reading and understanding the above statements and conditions.

<b>Participants Name</b>	<b>Participant Address</b>	<b>Participant Signature</b>
<b>Parent/Guardian Name</b>	<b>Parent/Guardian Address</b>	<b>Parent/Guardian Signature</b>
<b>Organization Witness Name</b>	<b>Organization Witness Signature (if available)</b>	
Signed this _____ Day of _____, 20____		