

# 2011 INBF "PRO-QUALIFYING" NATURAL NEW YORK STATE BODYBUILDING & FIGURE CHAMPIONSHIPS

**Saturday October 22, 2011**

**POUGHKEEPSIE HIGH SCHOOL 70 FORBUS STREET, POUGHKEEPSIE, NY 12603**

**Check In: 8 AM. Prejudging: 11 AM. Evening Show Time: 6 PM.**

**Eligibility:** Open to all amateur athletes who have a current INBF card (\$40.00) or may obtain one the day of show. Athletes must be drug free for 7 years from the date of show.

**Polygraph testing:** \$40.00 payable to tester only on the day of the show. (We don't accept payment)

**Entry fee: \$45.00 Crossover \$35.00**

**Awards:** 1<sup>st</sup> five places in each weight class and overall. Figure 1<sup>st</sup> to 5<sup>th</sup> place.

**Music:** CD must be preset to a maximum of 60 seconds.

**Deadline:** Saturday October 15, 2011 (Late Fee registration additional \$50.00)

## Men's Classes

## Women's Classes

<input type="checkbox"/> Teenage men (13 – 19)	<input type="checkbox"/> * Women's Open Bodybuilding Lightweight under 118 lbs
<input type="checkbox"/> Juniors men (19 – 23)	<input type="checkbox"/> * Women's Open Bodybuilding Heavyweight over 118 lbs
<input type="checkbox"/> Men's Novice - Three classes to be announced	<input type="checkbox"/> Women's Masters Bodybuilding over 40 years of age
<input type="checkbox"/> * Men's Masters Over 40 Lightweight	<input type="checkbox"/> * Women's Figure ( A ) Short
<input type="checkbox"/> * Men's Masters Over 40 Heavyweight	<input type="checkbox"/> * Women's Figure ( B ) Medium
<input type="checkbox"/> Men's Masters Over 50	<input type="checkbox"/> * Women's Figure ( C ) Tall
<input type="checkbox"/> Men's Grand Masters Over 60	(Classes to be determined day of show)
<input type="checkbox"/> * Men's Open Lightweight up to 156 lbs	<input type="checkbox"/> * Women's Figure Masters – over 40 years of age
<input type="checkbox"/> * Men's Open Middleweight 156 ¼ - 176 lbs	<input type="checkbox"/> * Women's Fit Body
<input type="checkbox"/> * Men's Open Light Heavyweight 176 ¼ - 190 lbs	<input type="checkbox"/> Women's Best Body
<input type="checkbox"/> * Men's Open Heavyweight - Over 190 lbs	
<input type="checkbox"/> <b>Men's WNBFF Pro Masters Cup</b>	<b>* Denotes Pro-Qualifying Event</b>
(See WNBFF website for further Info.)	

PRINT NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone # Home ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Height \_\_\_' \_\_\_" Weight (Approximate day of show) \_\_\_\_\_ lbs AGE \_\_\_\_\_

E Mail: \_\_\_\_\_

Gym Representing \_\_\_\_\_

INBF membership#: \_\_\_\_\_ EXP: \_\_\_\_\_

Previously tested by the INBF 90 days. If yes \_\_\_\_\_ What INBF Show \_\_\_\_\_

TITLES WON: \_\_\_\_\_

**\*WAIVER:** In consideration of your accepting this entry, I hereby intend to be legally bound for myself, my heirs, executors and administrators, and waive and release any and all rights and claims for damages I may have against the International Natural Bodybuilding Federation Inc. (INBF), Poughkeepsie High School, World Natural Bodybuilding Federation, Inc. (WNBFF), House of Nutrition, Matt Johnson and any sponsors, agents, representatives and assigns for any injuries and/or losses suffered by me as a result of my participation and/or attendance at the 2011 INBF Natural New York State Saturday October 22, 2011. I understand that, in order to compete in A INBF-sanctioned event, I will be required to submit to up two (2) drug tests to validate a seven year abstinence from the use any type steroids, hormones, pro-hormones, prescription diuretics and any and all other compounds deemed illegal by the decision of the INBF concerning my participation in an INBF-sanctioned contest pending the results of one or both tests, as well as my adherence to all INBF rules and regulations. Failure to pass INBF drug tests or failure to adhere to INBF rules and regulations will result in my expulsion from the competition in question, as well as loss of INBF eligibility for seven years. I also agree to submit to any and all out-of-season testing required by INBF and agree to stand by the results of said testing, whatever it may be.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN (IF UNDER 18). \_\_\_\_\_

**Send Check or Money order to: Matt Johnson  
C/O House of Nutrition 5 College View Avenue,  
Poughkeepsie, NY 12603  
845-471-7712**