

# IDFA 98 CALGARY

## BODYBUILDING, PHYSIQUE, FIGURE, FITNESS MODEL, BIKINI, TRANSFORMATION ENTRY FORM

SATURDAY, JUNE 11, 2016  
Orpheus Theatre, SAIT Campus  
1301 16 Avenue NW, Calgary, AB, Canada  
FOR MORE INFO CONTACT US AT:  
780-243-1111  
www.idfa.ca



■ IDFA PRO-QUALIFIER ■

### CHECK THE APPROPRIATE CLASS or CLASSES BELOW:

#### MEN'S BODYBUILDING

- Novice (classes to be determined)
- Open (classes to be determined)
- Masters (40 years old and over)

#### MEN'S PHYSIQUE

- Novice
- Open
- Masters (40 years old and over)

#### TRANSFORMATION CHALLENGE

- Transformation Challenge

#### WOMEN'S FIGURE

- 1RYLFH
- 2SHQ
- 0DVWHUVHDUVROGDQGRYHU

#### WOMEN'S FITNESS MODEL

- 1RYLFH
- 2SHQ
- 0DVWHUVHDUVROGDQGRYHU

#### WOMEN'S BIKINI

- 
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#### ADDITIONAL INFORMATION

- IDFA Pro-Qualifier: \$QUR&DUGLOOEH  
DDUGHGWRWKH2YHUUO2SHQ: LQQHUVLQHDFFGLYLVLRLQ
- Novice Eligibility:  
  - &RPSHWLWURUKDQVQRWSDFHGLQWKHWRSDDQ  
2SHQGLYLVLRLQDQQRUJDQLDWRQ
  - &RPSHWLWURUKDQVQRWSDFHGLQWKHWRSDDQ  
1RYLFHGLYLVLRLQDQQRUJDQLDWRQ
- Women's Figure/Fitness/Bikini Model Classes:  
  - &RPSHWLWURUKDQVQRWSDFHGLQWKHWRSDDQ  
6257DQGXQGHU7\$//RYHU
- All Figure / Fitness / Bikini model competitors  
MUST fill in "Height" below in REGISTRATION  
INFORMATION
- 00FRPSHWLWURUVXPVWEHDWHDVWHDUVRIDH

### REGISTRATION INFORMATION (PLEASE FILL IN ALL INFO & PRINT CLEARLY):

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**T-shirt Size:**  
 Men's  
 M  L  XL  
 Women's  
 S  M

\*SPECIAL THANKS WILL BE READ ONSTAGE BY SHOW HOST\*

### PAYMENT AMOUNT 611(8721) NOTE: Registration cannot be processed until payment is received.

Select	Base Entry Fee	Photos	TOTAL (QWUWKRXW3KRWRV)	TOTAL (QWU3KRWRV)
<input type="checkbox"/> \$150.00	\$150.00	<input type="checkbox"/> \$80.00	= <input type="checkbox"/> \$230.00	RU <input type="checkbox"/> \$241.50
<input type="checkbox"/> \$200.00	\$200.00	<input type="checkbox"/> \$80.00	= <input type="checkbox"/> \$280.00	RU <input type="checkbox"/> \$316.40
<input type="checkbox"/> \$250.00	\$250.00	<input type="checkbox"/> \$80.00	= <input type="checkbox"/> \$330.00	RU <input type="checkbox"/> \$372.90
<input type="checkbox"/> \$300.00	\$300.00	<input type="checkbox"/> \$80.00	= <input type="checkbox"/> \$380.00	RU <input type="checkbox"/> \$429.40

### METHOD OF PAYMENT (SELECT ONE)

Registration cannot be processed until payment is received.

CHEQUE / MONEY ORDER  
SDDEOHWR: \$

OR

### IDFA DRUG TESTING & WAIVER (PRINT NAME, SIGN AND DATE IN BOTH AREAS)

100-QU DQ-ERQ LRRRIQU LQ DDUU-1-D  
 DQR DQ DQ-URLEL E DQF-LQ LQ URL EL RUQLR LQ DQ D  
 UL U Q ROLF DQURF U DQ RQ 2IF LDD E L

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

**WAIVER (PLEASE SIGN & DATE BELOW):**

I, \_\_\_\_\_, do hereby certify that I am a natural born citizen of the United States of America and I am not currently under any federal, state, or local drug control laws. I understand that I will be subject to random drug testing at any time during the competition. I agree to abide by the rules and regulations of the IDFA and to accept the consequences of a positive drug test result, which may include disqualification and suspension from future competitions. I understand that the IDFA is not responsible for any injury or damage that may occur during the competition. I agree to indemnify and hold the IDFA harmless from any and all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against or incurred by the IDFA, its officers, directors, members, or volunteers, arising out of or from my participation in the competition. I understand that my participation in the competition is entirely voluntary and that I am not being coerced or forced into participating. I agree to release and hold the IDFA, its officers, directors, members, or volunteers, harmless from any and all claims, damages, and expenses, including reasonable attorneys' fees, that may be asserted against or incurred by the IDFA, its officers, directors, members, or volunteers, arising out of or from my participation in the competition. I understand that I am waiving my right to sue the IDFA, its officers, directors, members, or volunteers, for any injury or damage that may occur during the competition. I agree to sign and date this waiver below.

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

**FREE T-SHIRT!!**  
 \$WKOHWHFHLRQHFREE Competition T-shirt  
 RQGDR IHYHQV Please fill in your T-shirt size above.

FAX TO: 416.363.IDFA (4332)

MAIL TO: International Drug Free Athletics (IDFA)  
 2211 Brant Street, PO Box 20084, Burlington, ON L7P 0A1