

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

**IDFA 134
MISSISSAUGA**

SATURDAY, APRIL 20, 2019
Meadowvale Theatre
6315 Montevideo Road, Mississauga, ON

Official Event of



FOR MORE INFO CONTACT US AT:
TEL: 905.315.8122, www.idfa.ca, info@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)

WOMEN'S FIGURE

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

WOMEN'S BIKINI

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

MEN'S PHYSIQUE

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

WOMEN'S FITNESS MODEL

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

TRANSFORMATION CHALLENGE

- Transformation Challenge

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

Name _____ Date of Birth _____ / _____ / _____
month day year

Email _____

Phone# (day) _____ Phone# (night) _____

Address _____

City _____ Prov/State _____ Postal Code/ZIP _____

Height _____ Contest Weight _____

Contests (Titles Won and/or Contests Placed in) _____

T-shirt Size:

Men's
 M L XL

Women's
 S M

"Special Thanks To" (20 words or less): _____

SPECIAL THANKS WILL BE READ ONSTAGE BY SHOW HOST

PAYMENT AMOUNT (SELECT ONE) NOTE: Registration cannot be processed until payment is received.

Select	Base Entry Fee	Photos	TOTAL(QWUZWKRXW3KRWRV)	TOTAL (QWU\3 KRWRV)
&/\$6	<input type="checkbox"/>	<input type="checkbox"/> \$80.00 =	<input type="checkbox"/>	RU <input type="checkbox"/>
&/\$66	<input type="checkbox"/>	<input type="checkbox"/> \$80.00 =	<input type="checkbox"/>	RU <input type="checkbox"/>
&/\$66	<input type="checkbox"/>	<input type="checkbox"/> \$80.00 =	<input type="checkbox"/>	RU <input type="checkbox"/>
&/\$66	<input type="checkbox"/>	<input type="checkbox"/> \$80.00 =	<input type="checkbox"/>	RU <input type="checkbox"/>

* All TOTALS are in CND (Canadian Funds) and include 13 HST

METHOD OF PAYMENT (SELECT ONE)

Registration cannot be processed until payment is received.

CHEQUE / MONEY ORDER
(payable to IDFA)



EMAIL MONEY TRANSFER
(sent to info@idfa.ca)

FREE T-SHIRT!!

Athletes receive one **FREE Competition T-shirt** on day of event. Please fill in your T-shirt size above.

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

I, _____, fully understand the condition of entering the IDFA 134: MISSISSAUGA is that I have not taken any prohibited substances identified in The 2019 Prohibited List, World Anti-Doping Code (WADC) and I have reviewed the IDFA Drug Testing Policies and Procedures as seen on the Official IDFA website.

► **SIGNATURE** _____ **DATE** _____

WAIVER (PLEASE SIGN & DATE BELOW): By your accepting my application to the IDFA 134: MISSISSAUGA Natural Bodybuilding, Physique, Figure, Fitness Model & Bikini Championships, along with my **non-refundable entry fee**, 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 Shaun Campbell, Meadowvale Theatre and International Drug Free Athletics (IDFA). This also includes all sponsors, agents, representatives and assigns for any and all injuries and/or losses suffered by me as a result of my participation and/or attendance and traveling to the IDFA 134: MISSISSAUGA Natural Bodybuilding, Physique, Figure, Fitness Model & Bikini Championships on April 20, 2019. These damages include, but are not limited to, published photographs that I may find to be unattractive or editorial which I may construe as being mis-representative. I also grant IDFA 134: MISSISSAUGA, International Drug Free Athletics (IDFA), IDFA.ca, and Shaun Campbell permission to use photos, videos or any likeness of myself to promote any future contests, videos, magazines or any other media involved with future and present contests for the purpose of promotion and/or sales of these media, without any compensation to myself, as condition of my entering the event. I also agree, by my own free will and without duress, to take a polygraph test and/or voice analysis test and submit a urine sample upon request. I also agree to the outcome of the tests results from the polygraph examiner, voice analysis examiner and unalysis center. I will abide by all International Drug Free Athletics (IDFA) rules and show good sportsmanship. By signing and submission of this form I am stating that I am Drug Free and will abide by the International Drug Free Athletics (IDFA) drug test policies and procedures.

► **SIGNATURE** _____ **DATE** _____

SEND TO: info@idfa.ca
(photo or scan of entry form)

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