

**2012 BRITISH MASTERS  
WEIGHTLIFTING CHAMPIONSHIP  
OFFICIAL ENTRY FORM  
(BWLA CENTENARY YEAR - MASTERS CHAMPIONSHIP)  
Mytholmroyd Community Centre  
Organiser – Bill Barton**

**BRITISH  
WEIGHTLIFTING**



**Sat. 17th and Sun. 18<sup>th</sup> March 2012  
Weigh-In 9 am to 10 am. Start 11 am  
(Both days)**

**Developing potential!  
Achieving goals!**

Please complete this form fully and in **BLOCK CAPITALS**

Name			
Address			Post Code
	:		
Date of Birth	/	/	Gender
Contact Phone No.			E-mail

BWLA Division		BWLA Membership No.	
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British Masters Weightlifting Championships BWT Class - Please circle (or shade) the correct value																
Men:	56	62	69	77	85	94	105	105+	Women:	48	53	58	63	69	75	75+

Total Achieved		
Age at 31 <sup>st</sup> Dec. 2012		Age Group
Age Groups	M35, M40, M45, M50, M55, M60, M65, M70, M75, M80 and W35, W40, W45, W50, W55, W60, W65, W70	

I realise I may be tested by the UK Sports Council at the championships and agree to comply with the instructions of the relevant Sports Council & BWLA Officials. I will not leave the venue until given permission to do so by the relevant officials of the Sports Council or Designated Authority.

- The closing date for entries is the **19<sup>th</sup> February 2012**
- Your BWLA Membership Book (or Home Country Membership Card) must be presented at the Weigh-In for the duration of the competition.
- Competitors will be notified of any changes to the above details. e.g. weigh in times. You will receive a Competition Schedule/Start List after the closing date.
- With this entry form you must enclose the following:
 

Entry Fees (British Masters Championship)	<b>£30</b>
Earlybird price before the <b>Fri. 10<sup>th</sup> Feb.. 2012</b>	<b>£20</b>

 Cheques must be made payable to **'BAWLA MASTERS'** and sent to:

Bill Barton 45, Middleton Drive, Bury, Lancs. BL9 8DT.
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I agree to be bound by the rules and regulation of BWLA and declare that I am physically fit to undertake the sport of weightlifting and have no knowledge of any medical condition which will make weightlifting contra-indicated to my well being.

Signed \_\_\_\_\_ Date \_\_\_\_\_