

UPA/UPA-AD American Record Application

Athlete Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Date of Birth _____ UPA Card # _____

Details of Record Being Claimed

Name of Competition _____ Date _____

Location _____ Competition Body Wgt _____ kg Wgt Class _____ kg

| | | | | |
|--------------------------------|---|--|---|--|
| Category & Division | UPA <input type="checkbox"/> | UPA-AD <input type="checkbox"/> | FULL MEET <input type="checkbox"/> | BENCH ONLY <input type="checkbox"/> |
| | | Men's <input type="checkbox"/> | Women's <input type="checkbox"/> | |
| | Open <input type="checkbox"/> | Junior 20-23 <input type="checkbox"/> | Teenage 13-15 <input type="checkbox"/> | Teenage 16-17 <input type="checkbox"/> |
| | Master - 33-39 <input type="checkbox"/> | 40-44 <input type="checkbox"/> | 45-49 <input type="checkbox"/> | 50-54 <input type="checkbox"/> |
| | | 55-59 <input type="checkbox"/> | 60-64 <input type="checkbox"/> | 65-69 <input type="checkbox"/> |
| | | | 70-74 <input type="checkbox"/> | |

Only enter the lifts that you are claiming

| Record Claim | First Attempt | Second Attempt | Third Attempt | Fourth Attempt |
|--------------|---------------|----------------|---------------|----------------|
| Squat | kg | kg | kg | kg |
| Bench | kg | kg | kg | kg |
| Deadlift | kg | kg | kg | kg |
| Total | kg | | | |

American Records can be set at National, and State competitions. According to the UPA Rules no record will be considered unless entered on this UPA Records Claims Form, which must be duly signed by the Athlete, the Referees adjudicating the lift(s), the meet director and the appointed Technical Officer of the competition. Certified platform scales must have been used at the weigh in. The bar and weights must have been weighed before the competition or immediately after the Record Attempt. The Athletes personal equipment must have been inspected and conform to the requirements of the UPA Rules. A minimum of three UPA card holding referees is required to certify a Record.

We have witnessed the correct performance of the above lift(s) and have checked the weight of the bars and discs. The lifter weighed in within 24 hours of the competition. The lifter and his/her attire have been checked and conform to the requirements of the UPA. We are current members in good standing with the United Powerlifting Association.

Judges Signature _____

Judges Signature _____

Judges Signature _____

Meet Directors Signature _____

I have checked all data and agree that the above information is correct.

Athletes Signature _____ Date _____

Send form to: UPA Headquarters, 4423 Gaffney Ct., Columbus, OH 43228