2019 Special Olympics WI, State Powerlifting Registration Form

Deadline: Monday April 8th, 2019

Team Name: _____

Agency Number: _____

Coach's Name: _____

Coach's Phone Number: _____

Coach's Email:_____

Number of Male Lifters: _____

Number of Female Lifters: _____

Number of T-shirts for coaches: __S __M __L __ XL __XXL ___3XL ____4XL

ATHLETE REGISTRATION

LIFTERS WILL BE ENTERED INTO THE COMBOS AT THE MEET

PLEASE PLACE X IN BOX FOR WHICH YOU WILL PARTICIPATE

LAST NAME	First Name	Shirt Size	MALE/	BENCH	SQUAT	DEADLIFT