

**ANBF Sanctioned**

**2019 ANBF 3DFIT Motor City Muscle Natural Classic IV**

**Bodybuilding, Figure, Bikini and Physique Championships**

**October 19, 2019**

**Seitz Middle School**

**17800 Kennebec St.**

**Riverview, MI 48193**

**Times:** 8:30 am Competitor's check in the day of show or, if necessary, the night before at the host gym, 3DFIT Ultimate Fitness Arena, 12425 Nixon, Riverview, MI.

11:15 am Competitor's meeting. All must attend.

12:00 pm Pre-judging begins and show runs until it is finished (straight thru format).

**Entry Fee:** Early Bird Sign up special- Amateur-\$90 with a \$35 crossover fee to other classes. Early Bird Deadline is 9/5/19. After that, Amateur-\$120 with crossover fee of \$45. Final deadline to enter is 10/12/19.

**Applications will be accepted after that, but a late charge of \$50 will be added.**

**Host Hotel is Hampton Inn Detroit/Southgate, 13555 Prechter Boulevard, Southgate, MI, 48195. 734-574-4000**

**Spray Tanning will be available. Contact info: [onefitjoker.com](http://onefitjoker.com)**

**Urinalysis is the testing method of the ANBF. There will be no polygraph testing at ANBF shows this year. Therefore, there will also not be any polygraph fees necessary. The ANBF will be using the 2019 WADA Prohibited List as its banned substance standard. You, as a competitor, are responsible to know the effects that certain supplements may present. Just because you may have bought it over the counter does not mean it is acceptable in the ANBF. Please research carefully. The WADA Banned List is posted on our website, [www.anbfnatural.com](http://www.anbfnatural.com) as well as the 2018 ANBF Drug Testing Policy.**

**Eligibility:** Open to all amateur and pro athletes who hold a ANBF membership. The ANBF accepts pros from all natural organizations. Membership applications can be obtained online at [www.anbfnatural.com](http://www.anbfnatural.com), or via email from the ANBF office. Cost of amateur membership is \$70.00. Pro memberships are \$100. The membership is good for a period of one year from date of purchase. You may send in entry form without your ANBF membership number. You'll get your card at the show.

**Music and Routines - All competitors will do a stage presentation which will be judged. CDs, mp3, smart phones accepted. A maximum of 60 seconds. Props are allowed.**

**Awards:** Top 5 competitors in each class and most entertaining stage presentation in the show. All open and masters overalls are ANBF pro qualifiers. If less than 6 competitors, the judges will decide if pro status is earned. If 4 or more pros, top 3 get payouts. If 3 competitors, top 2 get payouts. If 2, first place only gets payout. If only one competitor, they get payout.

**Contact information:** Tom Burick, 734-626-0806 or [tom@3dfitarena.com](mailto:tom@3dfitarena.com) or Donna Burick, 734-626-3676 or [donna@3dfitarena.com](mailto:donna@3dfitarena.com).

## **CLASSES:**

Teenage Bodybuilding (ages **13-19**)

Men's Bodybuilding Debut (***First time competitors only***)

Men's Bodybuilding Novice

Men's Bodybuilding Open ***Classes are set based on entries and check in weights.\****

Men's Bodybuilding Masters (**40+**, **50+**, **60+**, **70+**) \*\*

Men's Classic Physique Debut (***First time competitors only***)

Men's Classic Physique Masters 40+ \*\*

Men's Classic Physique Open \*

Men's Physique Debut (***First time competitors only***)

Men's Physique Novice

Men's Physique Masters (**40+**, **50+**) \*\*

Men's Physique Open \*

Women's Physique Debut (***First time competitors only***)

Women's Physique Masters (**40+**) \*\*

Women's Physique Open \*

Classic Bikini Debut (***First time competitors only***)

Classic Bikini Masters \*\*

Classic Bikini Open \*

Bikini Debut (***First time competitors only***)

Novice Bikini

Masters Bikini (**35+**, **50+**) \*\*

Open Bikini \*

Women's Bodybuilding Masters (**40+**) \*\*

Women's Bodybuilding Open (**1 Class**) \*

Women's Figure Debut (***First time competitors only***)

Women's Figure Masters (**40+**) \*\*

Women's Figure Novice

Women's Figure Open - ***Classes are set based on entries and check in heights.\****

**\* ANBF PRO QUALIFIER**

**\*\* ANBF MASTERS PRO QUALIFIER**

# Entry Form for 3DFIT Ultimate Showdown

(Please Print Clearly)

**ENTRY FEES ARE NON - REFUNDABLE OR CREDITS GIVEN!**

**Pay by check or money order payable to 3DFIT Ultimate Fitness Arena**

**Send To: 3DFIT Ultimate Fitness Arena c/o Tom Burick, 12425 Nixon, Riverview, MI, 48193**

CLASS(ES) ENTERING \_\_\_\_\_

Name \_\_\_\_\_ ANBF # \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Height \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Gym \_\_\_\_\_ Occupation \_\_\_\_\_

## **RELEASE**

I acknowledge that athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by the terrain, the facilities, temperature, weather, condition of athletes, spectator, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize liability may arise from negligence, carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability form will be used in the event holders, sponsors, organizers, in which I may participate and that it will govern my actions and responsibilities at said event.

In consideration of my application and permitting me to participate in this event, I hereby take actions for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property thefts or actions of any kind which might hereafter accrue to me including my traveling to and from this event, the following entities or persons:

Their directors, officers, employees, representatives, and agents, the event holders, event sponsors, event volunteers; (B) indemnify and hold harmless the entities or persons mentioned in this paragraph from any and all liability or claims made as result of participation in this event, whether caused by the negligence of releases or otherwise.

I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury accident or illness during this event.

I understand that at this event or related activities, I may be photographed. I hereby agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns.

I understand that this is a drug-tested contest and agree to submit to any testing method approved by the contest promoter. I also agree to accept, without challenge, the results of such drug tests. Unless in the case of inconclusive results, I understand agree that the preliminary results are final.

The accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document and I understand it's contents.

\_\_\_\_\_  
Print Participants Name

\_\_\_\_\_  
Age

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
(If under 18 years old, Parent or guardian must also sign)

\_\_\_\_\_  
Date

### **Parent Guardian Waiver for Minors**

The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all the parties referred to above from all liability, loss, claim or damage whatsoever which may be imposed upon said parties because of any defect or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

\_\_\_\_\_  
Print Participants Name

\_\_\_\_\_  
Age

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

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