ANBF Sanctioned

2024 Crystal Coast Championships XI

Bodybuilding, Figure, Bikini, Wellness and Physique Championships Pro/Am

Featuring Pro Bikini, and Pro Classic

July 20, 2024

Crystal Coast Civic Center 3505 Arendell Street Morehead City, NC 28557

Times: Early check-in Friday night,7/21 (630-730pm), location TBA. Late check-in will be at the venue from 1030-11am, Saturday.

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

12:00pm The "Show" begins and runs until it is finished.

Entry Fee: EARLY BIRD SIGN UP SPECIAL- Amateur-\$120 with a \$60 crossover fee to other classes. Pro-\$250 per class entered. Early Bird Deadline is 06/15/2024. After that, Amateur-\$170 with crossover fee of \$75 and Pro is \$300 per class entered. Final deadline to enter is 7/13/2024. Applications will be accepted after that, but a late charge of \$75 will be added.

Host Hotel TBA

Spray Tanning. Contact Bronzed Bodies, email to bronzedbodiesllc@gmail.com for info and apt.

Hair and Makeup TBA

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 2024 WADA Prohibited List as it is the 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 as well as the 2024 ANBF Drug Testing Policy.

Eligibility: Open to all amateur and pro athletes who hold an ANBF membership. Membership applications can be obtained online at www.anbfnatural.com, or via email from the ANBF office. The cost of amateur membership is \$120.00. The cost of pro membership is \$175. You will get \$10 discounts for up to 4 other natural org memberships (total \$40). The membership is good for a period of one year from the date of purchase. You may send in the entry form without your ANBF membership number. You will get your card at the show.

Music: Please email your music to DJ Frank at mytwotoyz@yahoo.com. Amateur routines are 60 seconds. Props are allowed. Pros are allowed up to 2 minutes. ALL COMPETITORS WILL DO A STAGE PRESENTATION!!

Awards: Top 5 competitors in each class and most entertaining stage presentation in the show. All open and master overalls are ANBF pro qualifiers. If there are less than 5 competitors, the judges will decide if pro status is earned.

**If 4 or more pros, top 3 get payouts. If 3 competitors, the top 2 get payouts. If 2, first place only gets payout. If only one competitor, they get payout. ** If 6 or more in class, first place payout is \$700. Minimum is \$500.

Photography / Video: No outside photography or professional style cameras are permitted. Please contact the Official Show Photographer, https://lancetylerphotos.com/anbf for info

Contact information: Email at krb46@comcast.net or call 732-213-6537

CLASSES:

Teenage Bodybuilding ages 13-19

Men's Novice Bodybuilding

Men's Open Bodybuilding* Classes determined at check in

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

Classic Physique Novice

Classic Physique Masters 40+**

Classic Physique Open *

Classic Physique Pro

Men's Novice Physique

Men's Masters Physique (40+)**

Men's Open Physique*

Women's Masters Physique (40+)**

Women's Open Physique*

Wellness Novice

Wellness Masters (40+)**

Wellness Open *

Novice Bikini

Masters Bikini (40+, 50+) **

Open Bikini*

Pro Bikini

Figure Masters (40+) **

Figure Novice

Figure Open*

- * ANBF Pro Qualifier
- ** ANBF Masters Pro Qualifier

Contact Kent Bierly, krb46@comcast.net, for questions or details.

FOR YOUR CONVENIENCE ENTRY IS AVAILABLE ONLINE AT ANBFNATURAL.COM.

(Please Print Clearly)

Print Participants Name

ALL PAYMENTS ARE NON REFUNDABLE AND NO CREDITS GIVEN

May pay by check or money order payable to ANBF, OR VIA PAYPAL TO EMAIL krb46@comcast.net (MUST STILL MAIL IN ENTRY FORM)

Send To: ANBF c/o Kent Bierly, 537 James Rd, Brick, NJ 08723 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' 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 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.

Signature of Parent or Guardian

Age