

ANBF Sanctioned

2024 Chill Town Show Down

Bodybuilding, Figure, Bikini, Wellness, Classic and Physique Championships

July 13, 2024

William L. Dickinson High School

2 Palisades Ave.

Jersey City, NJ 07306

Times: Friday 7/12 Competitor's check in. Time and location TBA.

7/13, 11:30 am Competitor's meeting. All must attend.

7/13 12:00 pm The show begins and runs until it is finished (straight thru format).

Entry Fee: EARLY BIRD SIGN UP SPECIAL- Amateur-\$125 with a \$60 crossover fee to other classes. Early Bird Deadline is 6/08/2024. After that, Amateur-\$175 with crossover fee of \$75. Final deadline to enter is 7/06/2024. Applications will be accepted after that, but a late charge of \$75 will be added.

Host Hotel TBA

Spray Tanning by Bronzed Bodies LLC. Email bronzedbodiesllc@gmail.com for info and apt..

Hair and makeup contact Cristy Tate at cristymtate@gmail.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 2024 WADA Prohibited List as it's banned substance standard. You, as a competitor, are responsible for knowing 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 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. You will get \$10 discounts for any other natural org memberships you have. The membership is good for a period of one year from the date of your show. You may send in the entry form without your ANBF membership number. You will get your card at the show.

Music: CDs only, a maximum of 60 seconds for amateurs. Props are allowed.

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

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.**

Contact information: Prefer email Kent Bierly at krb46@comcast.net or call 732-213-6537, or Brian Molyvade, 732-791-7705

CLASSES:

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

Men's Bodybuilding Novice

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

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

Classic Physique Novice

Classic Physique Masters 40+

Classic Physique Open*

Men's Physique Novice

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

Men's Physique Open *

Women's Physique Masters **40+ ****

Women's Physique Open *

Wellness Novice

Wellness Masters **40+****

Wellness Open*

Bikini Novice

Bikini Masters (**40+, 50+**) **

Bikini Open *

Figure Masters (**40+, 50+**) **

Figure Novice

Figure Open - *Classes are set based on entries and check in heights.* *

* ANBF PRO QUALIFIER

** ANBF MASTERS PRO QUALIFIER

Entry Form for Chill Town Show Down

ENTRY FEES ARE NON-REFUNDABLE AND NO CREDITS GIVEN

Entry is available online at anbfnatural.com

Or

Send To: Pure Focus c/o Kent Bierly, 2055 Rt 88, Brick, NJ 08724, May also pay via paypal to krb46@comcast.net but still must mail in entry form. Make checks or money orders payable to ANBF.

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
