

USPF AMERICAN RECORD APPLICATION



~American Records require at least 2 of the 3 USPF Referees (all 3 must have current memberships and be Official USPF Referees) ranked at a National or International level.~

~Meet Directors must send the meet results to the American Records Chair within 14 days for verification prior to new records and certificates being issued.~

~American Record Applications must be sent to the American Records Chair within 30 days of the date of the record being set. ~ Please print clearly.

Name		Male or Female	
Address	City	State	Zip
Birth Date & Year Phone	Email		
Age Day of Meet Meet Date	Body Weight	Weight Cl	ass
Registered USPF Membership Card #	Expiration Date		
Name of Competition		USPF Sanct	ion#
Location (City & State)	Meet Directo	or	
Military Branch (for Military Records only	~ active duty only)		
Police or Fire Department Name (for Police	e/Fire Records only)		
Check the division you entered:			
RAW K/S DIVISION 3 (Knee Sleeves o	or No Aids)		
RAW K/W DIVISION 4 (Knee Wraps I	MUST be worn & is only offe	red in Full Pow	er and S/L Squat)
SINGLE PLY ~ DIVISION 1MI	ULTI PLY ~ DIVISON 2		
Check the event(s) <u>you entered</u> a can be entered only if calibrated di to write lbs. if used):			
Full Power Meet: Squat Bench	n Press Deadlift	Total	
Push/Pull Meet: Bench Press	Deadlift Total		
Single Lift Squat Meet: Squat	Single Lift Bench	Press Meet: B	ench
Single Lift Deadlift Meet: Deadlift			
Circle category entered (if more separate applications for each coopen SubMasters Teen: 13-15 16-17 18-19 Masters: 40-44 45-49 50-5 High School Collegiate	ategory): Juniors (20-23)		

Total # of records on this applicat	tíon:	
Do you want a Certífícate(s)? Yes	or No (If neither is circled, no certificate will be issued.)	
* PDF emailed to you ~ FREE (U	se your choice of types of papers.)	
	rst class ~ \$5 (Printed on parchment paper. PayPal money order payable to Sheri Hartmann and send to	
<u>Full Power Only</u> : Is this a new Lyneed to fill out a Lifter Classification	fter Classification for you? (You will Application form.)	
All three (3) Referees' & Weigh-In rank circled. All Referees MUST	n Official's <u>signatures are required</u> along with be an Official USPF Referee.	
Referee	(Rank: State, National, or International)	
*Print Referee's Name	USPF Member # & Exp. Date	
Referee	(Rank: State, National, or International)	
*Print Referee's Name	USPF Member # & Exp. Date	
Referee	(Rank: State, National, or International)	
*Print Referee's Name	USPF Member # & Exp. Date	
Weigh-In Official	(Rank: State, National, or International)	
*Print Official's Name	USPF Member # & Exp. Date	
Athlete's Signature:	Date:	

Please send <u>completed</u> application(s) to:

USPF American Records Chair ~ Sheri Hartmann
P.O. Box 1148, Tombstone, AZ 85638
Fmail: USPFtheLegend@aol.com
(A jpeg copy of the Application may emailed to the above email address in lieu of "snail mail".)
PayPal available online on USPF American Records page.