2018 Special Olympics WI, State Powerlifting Registration Form

| Team Name: | |
|--|--|
| Agency Number: | 2018 |
| Coach's Name: | Special Olympics Wisconsin |
| Coach's Phone Number: | STATE |
| Coach's Email: | - POWERLIFTING |
| Number of Male Lifters: | I OW LIKEII IIIKO |
| Number of Female Lifters: | |
| Number of T-shirts lifters and coaches:SML _ | XLXXL3XL4XL |
| LIFTERS WILL BE ENTER | RED INTO THE PLEASE PLACE X IN BOX FOR WHICH |

COMBOS AT THE MEET

YOU WILL PARTICIPATE

| LAST NAME | FIRST NAME | MALE/FEMALE | BENCH | SQUAT | DEADLIFT |
|-----------|------------|-------------|--------|-------|----------|
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