

SPECIAL OLYMPICS BC EVENT PLANNING GUIDE POWERLIFTING SUPPLEMENT

Updated August 2012



JOB DESCRIPTION - OFFICIALS

Primary Officials

Judges

Qualifications

- Experience judging either Generic or Special Olympic Powerlifting Meets.
- Successfully complete the BC Powerlifting Associations Officials Certification Program and be a member in good standing with the BCPA.

Responsibilities

- Responsible for ensuring that the meet is run in accordance with the rules and regulations of Special Olympics Canada and the BC Powerlifting Association and the Canadian Powerlifting Union.
- Judge each lifter based on the rules of powerlifting.

Statistician

Qualifications

- Experiences acting as a Statistician and/or official at either a Generic or Special Olympics Powerlifting meet.
- Successful completion of the BC Powerlifting Associations Officials Certification Program is strongly recommended.

Responsibilities

- Responsible for recording the results of the meet onto the master score sheet.
- Responsible for sorting the final results based on weight category and identifying final placings.

Expeditor

Qualifications

- Experiences acting as an expeditor and/or official at either a Generic or Special Olympics Powerlifting meet.
- Successful completion of the BC Powerlifting Associations Officials Certification Program is strongly recommended.

Responsibilities

- Responsible for taking the next attempts from each lifter and passing information onto the Statistician.
- Responsible for organizing the flights based on each lift attempt.
- Responsible for passing the next lifters' information to the Announcer.

Secondary Officials

Announcer (1)

- Responsible for the overall flow of the competition.
- Responsible for announcing the lift attempts to the floor judges so the bar can be loaded.
- Responsible for announcing the next lifter as well as the lifter on deck and in the whole.
- Responsible for identifying a successful lift based on the information provided from the Head Judge.



 Responsible for filling breaks in which the bar is being loaded with information on the next lifter or other relevant competition information.

Loaders (4)

• Responsible for loading the bar with the weight identified by the Head Judge.

Spotters (3)

Responsible for spotting each lifter's attempt for safety purposes.

Recorder (2)

 Responsible for recording lift attempts and success/failures on a wall chart for spectators to view.

Due to the unique nature of the sport of Powerlifting it is recommended that locals wishing to host a regional qualifier approach a well establish generic competition with the intention of hosting a joint event. The rationale for this approach if multi-faceted including but not limited to the following:

- The low athlete numbers experienced by the sport of Powerlifting within Special Olympics BC makes it difficult for any one (1) region to host a quality competitive opportunity for athletes and coaches. As such it is in the best interests of athletes and coaches to host joint events for the purposes of qualifying for Provincial Games.
- The resources necessary to host a quality Powerlifting competition are extensive, i.e. Equipment and Certified Officials. By building a partnership with a well established generic competition and/or generic club your access to these resources will be enhanced.

Awards

All competitors are to be awarded participation ribbons with the athlete lifting the highest, second highest and third highest total weight in each gender and weight class receiving 1st, 2nd and 3rd place awards accordingly.

MEDICAL REQUIREMENTS

The following are the minimum requirements for medical coverage at sanctioned Special Olympics BC Powerlifting competition.

Two (2) First Aid attendants - (standard certification)



EVENT FLOW

- 1. Athletes are required to weigh in at least two (2) hours before the scheduled start of the meet.
- 2. At the time of weigh-in athletes must give their 1st attempt for all disciplines.
- The meet begins when the Announcer announces the first lifter and the 1st attempt. Order of events - Squat - Bench - Deadlift.
- 4. The Announcer will identify the 1st attempt to the Head Judge who will ask the Loaders to the load the bar to the specified weight.
- 5. Once the bar is loaded the Head Judge will signify to the Announcer that the bar is loaded. From this point the lifter has one (1) minute to complete his/her lift attempt.
- 6. Following the lifters attempt the three (3) floor judges will signify using three (3) lights whether the attempt was successful or not. (two (2) of three (3) lights of the same color signifies a successful or failed attempt)
- 7. Following the attempt, successful or not, the lifter has five (5) minutes to identify their next attempt.
- 8. This procedure continues until all lifters have had their three- (3) attempts in each discipline.
- 9. There are scheduled breaks between disciplines. The Head Judge depending on the flow of the meet and the available time will determine the length of these breaks.



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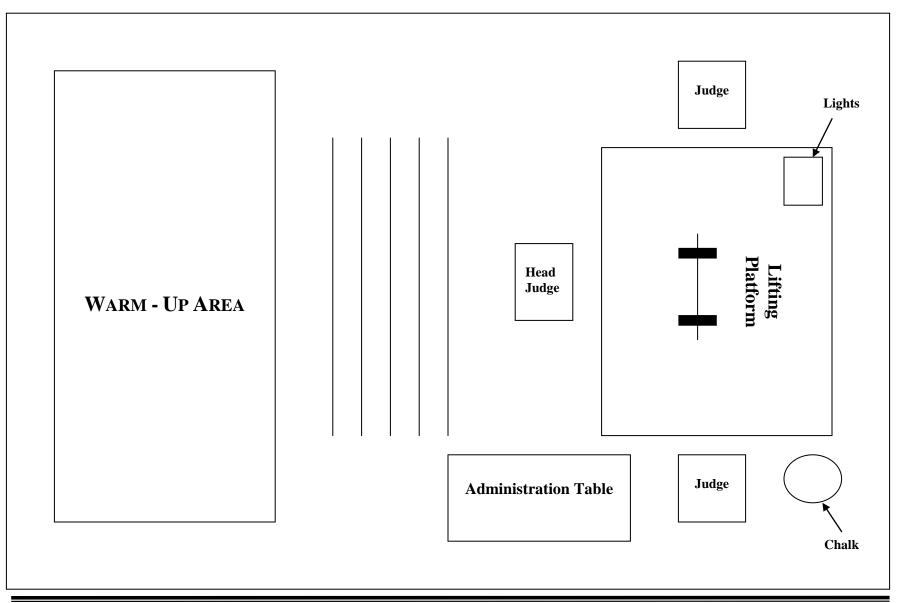
EQUIPMENT CHECKLIST

EQUIPMENT NEEDED	NUMBER REQUIRED	CHECKED
Weights (lbs. vs. kg)	2 sets (1 warm-up)	
Lifting Bars	3	
Lifting Benches	3	
Lifting Platform	2	
Easy Loader	1	
Chalk and basin	2	
Light system	1	
Precision Scale	1	
Numbered Judge Cards (1, 2, 3)	3 sets	
Folding Tables	5-6	
Chairs	20-25	
P.A. System	1	
Stereo with CD/Tape	1	
Pens/Pencils	2 dozen	
Paper	1 box	
Clipboards	4-5	
Lifting Cards (1 per lifter per discipline)	Dependent on Reg.	
Results Board	1	
Announcement Board	1	
Awards - medals or ribbons	Dependent on Reg.	
Sponsor Banners	Dependent on Sponsors	
Special Olympics Banners	2	

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SPECIAL OLYMPICS BC POWERLIFTING MEET

REGISTRATION FORM

WEIGH – IN:	 LIFTS:	BENCH PRESS/DEADLIFT
LIFTING:		SQUAT

REGISTRATION FEE:

* All athletes must wear either a Powerlifting Suit or a Wrestling Singlet, (T-shirt with no logos).

LOCAL (CLUB): _____

Athlete Name	Gender	Weight (Ibs.)
1)		
2)		
3)		
4)		
5)		
6)		
7)		

Head Coach: _____

Assistant Coach: _____

Assistant Coach: _____

CONTACT PERSON: (for any additional or change of information)

Name:	
Address:	
City:	Prov. / State:
Phone #:	Fax:

PLEASE RETURN THIS FORM TO: