



Office Use Only

Member #: \_\_\_\_\_

Expires: \_\_\_\_\_

OCB MEMBERSHIP FORM

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ DOB: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Area of Interest (circle one): Men's Bodybuilding, Male Model, Women's Bodybuilding, Figure, Bikini, Female Model, Ms. Fitness

Are you interested in helping out at local shows? \_\_\_Yes \_\_\_No. Do you have judging experience? \_\_\_Yes \_\_\_No

Drug testing screening methods used at OCB events are a means to determine eligibility. If competitors can not successfully pass any screening methods used, they will either not be allowed to compete if determined prior to the event (Ex. Polygraph test), or will be disqualified and be removed from official results if determined after an event (Ex. Urine test). Competitors cannot have used any substances indicated as being banned for OCB competitions (complete list of banned substances is posted online at thenaturalmusclenetwork.com/OCB/forms/DrugTestingGuidelines.pdf). Competitors are ultimately responsible for substances they take. If urine test results come back positive for any banned substance, competitors are disqualified regardless of what may have been responsible for the positive result.

I agree to abide by the decision of the OCB, and/or contest promoters concerning my participation in an OCB-sanctioned contest pending the results of any form of testing used to detect use of banned substances with OCB. I understand that the administrator or laboratory utilized for substance screenings is the choice of the OCB and/or the promoters, and agree to accept the results of said testing, whatever they may be. I hereby waive and release any claims or demands against the OCB, its representatives, sponsors and promoters that may arise out of my participation in an OCB-sanctioned event or my membership in the OCB.

I hereby intend to be legally bound for myself, my heirs, executors and administrators, and waive and release any and all rights and claims for damages I may have against the facility owners, OCB, affiliated federations, the promoters, and any sponsors, agents, or representatives for any injuries suffered by me as a result of my participation and/or losses suffered by me as a result of my participation and/or attendance at any OCB contest.

I have read, understand and agree to all terms included in this document:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent (if under 18): \_\_\_\_\_ Print Parent's Name: \_\_\_\_\_

Annual Membership Fee: \$60.00 - Mail To: OCB, PO Box 7146, Surprise, AZ 85374

Members receive a one-year (3-issue) subscription to Fitness & Physique, a newsstand magazine that prints coverage of all OCB events. Payment can be made by check\*, money order, or credit card\*\* (Visa and MasterCard only cards that can be accepted).

\*Checks not accepted for memberships sent in less than two weeks before show competing in. Money order or credit card payment only if within two weeks of show.

\*\*During check-in at events, only cash or money order can be accepted - no checks or credit cards.

\*\*Additional \$2 convenience fee charged for credit card orders (\$62 total billed).

If paying by credit card, complete below and fax to 240-455-0640 or mail to above address.

Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Card Type: \_\_\_Visa\*\* \_\_\_MasterCard\*\*

Name as it Appears on Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use: \_\_\_ Processed Credit Card \_\_\_ Logged by Accounting \_\_\_ Data Keyed \_\_\_ Card Issued \_\_\_ Flyer