

Trussville Muscle & Fitness Classic

September 6, 2014

MAIL TO: Trussville Muscle Classic
c/o Samuel Jones
P.O. Box 252
Trussville, AL 35173

Name: _____

Phone: _____

Address: _____

City _____ **State** _____ **Zip** _____

e-Mail Address: _____

Prejudging:

_____ @ \$15.00 = \$ _____ Open Seating

Finals:

_____ @ \$20.00 = \$ _____ Open Seating

Children (under 12) _____ @ \$5.00 = \$ _____ (sit with parent/guardian)

TOTAL AMOUNT DUE \$ _____

Make check or money (no credit/debit cards) order payable to:
Trussville Muscle Classic

**Tickets will be available for pick up at Weigh in on
Friday night or at the Ticket Tables at the show**