

2012 CONNECTICUT SENIOR GAMES OFFICIAL REGISTRATION FORM

ONLINE REGISTRATION AVAILABLE: WWW.SENIORGAMESCT.ORG



First Name: _____ Middle Initial: _____ Last Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Day Phone: _____ Email: _____

Male Female (Must be checked) Date of Birth: _____ Age on 12/31/12: _____ Retired Yes No

Previous National Senior Games Athlete Yes No NSGA# _____

How did you hear about our Senior Games? Previous Participant Word of mouth Website Poster / Flyer Senior Center

Individual Sports **Added Age Divisions 30-39, 40-49 (Pickleball, Swimming & Track & Field only)*

PLEASE VISIT: www.seniorgamesct.org to view specific sport entry fees.

Select your sport(s)

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> ARC: Archery (\$35.00) | <input type="checkbox"/> BAD: Badminton (\$30.00+) | <input type="checkbox"/> BWL: Bowling (\$35.00+) | <input type="checkbox"/> CYC: Cycling (\$30.00+) |
| <input type="checkbox"/> GLF: (\$75.00) Handicap _____ | <input type="checkbox"/> PKL: Pickleball (\$35.00) | <input type="checkbox"/> RAC: Racquetball (\$35.00+) | <input type="checkbox"/> SHT: Shooting* (\$30.00) |
| <input type="checkbox"/> SWM: Swimming* (\$30.00+) | <input type="checkbox"/> TAT: Table Tennis(\$30.00+) | <input type="checkbox"/> TEN: Tennis (\$35.00+) | <input type="checkbox"/> T&F: Track & Field* (\$30.00+) |

Please Check All that Apply: Singles Doubles Mixed Doubles.

Doubles Partner: _____ Partner's Age (on 12/31/12): _____

Mixed Doubles Partner: _____ Partner's Age (on 12/31/12): _____

For Archery Only - Please check events you will be participating in:

- Recurve Compound Fingers Compound Release Long Bow

For Badminton Only: Rating _____

Cycling, Shooting, Swimming & Track & Field, Please list the events you will be competing in. Swimmers please include your best estimated time per event.

Event (1): _____ Event (2): _____

Event (3): _____ Event (4): _____

Event (5): _____ Event (6): _____

Team Sports **Added Age Divisions 30-39, 40-49 For Team Captains Only—Signed Rosters Required*

- 3-on-3 Basketball* \$200.00 Slow Pitch Softball* \$425.00 Volleyball* \$200.00

Age Divisions (Please Select One)

- 30-39 40-49 50-54 55-59 60-64 65-69 70-74 75-79 80-84 85-89 90+

ATHLETE'S WAIVER, PLEDGE AND CONSENT AGREEMENT

In consideration of the acceptance of my entry into the competition known as the Connecticut Senior Olympics, I, intending to be legally bound, do hereby for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages, including any claims for loss, damages or injury to my person or property arising out of the performance or failure of performance of the State of Connecticut, the Connecticut Senior Olympics, the Nutmeg State Games, any and all sponsors, groups providing sanction or approval, owners of the sites, and/or the respective officer/agents, representatives, successors and/or assigns of the parties named above for any and all claims for damage to person or property sustained by me in connection with, association or entry in, and/or arising from activity related to the Connecticut Senior Olympics.

I have full knowledge that the sport in which I have entered carries significant risk of personal injury, in some cases very severe injury, even death. I also agree that I am responsible for my own safety. I declare that to the best of my knowledge, I am in good physical condition and have no disease or injury that would be aggravated by my participation in activities related to the Connecticut Senior Games.

I, also, declare on my honor that I am an amateur and fulfill the conditions stipulated by the Connecticut Senior Olympics. I agree that if I am selected for competition at the Finals of the Games, I will compete in the Games, keep myself in top physical condition, retain my amateur status and make myself available for training wherever and whenever possible. I will also appear and participate in the Opening Ceremonies and report to the press tent for pictures, interviews, as directed by Connecticut Senior Olympic authorities.

I understand that the consumption of alcohol beverages or non-prescribed drugs at any Connecticut Senior Games venues, events, or dormitories is strictly prohibited and that failure to conduct myself in a socially responsible manner (to be determined by Connecticut Senior Olympic authorities) will result in immediate expulsion from the Connecticut Senior Olympics.

I hereby consent to allow my picture or likeness to appear in any official documentary, sponsor advertisement or exclusive television coverage of the Connecticut Senior Olympics in any manner incidental to my participation in the Connecticut Senior Olympics and without compensation to me. I declare that I have personal medical coverage and that I have read all of the above and understand the release waiver, and by signing I agree to all its items.

BY ENTERING AND PARTICIPATING IN THE CONNECTICUT SENIOR GAMES, ALL ATHLETES AGREE TO ABIDE BY THE RULES, REGULATIONS AND DISCIPLINARY ACTION OF THE GAMES' ADMINSTRATORS. FAILURE TO DO SO MAY RESULT IN SUSPENSION, EXPULSION AND/OR FORFEITURE.

SIGNATURE _____ DATE _____