

2012 Individual Athlete Registration Forms

New participants <u>must</u> enclose a copy of a valid driver's license or MVA identification.

Please print clearly. You must fill out and submit both pages of this Individual Form.

Were you a professional or Olympic athlete? Yes [] No [] Event or sport/team	ruii Name:				
Emergency Contact:	Street Address:				
Emergency Contact: Relationship: Phone: Gender: Male [] Female [] Status: Returning Athlete [] New Athlete [] Were you a professional or Olympic athlete? Yes [] No [] Event or sport/team	City: S	tate:	Zip:	County:	
Gender: Male [] Female [] Status: Returning Athlete [] New Athlete [] Were you a professional or Olympic athlete? Yes [] No [] Event or sport/team	Birth Date (month/day/year): P	hone:	e-l	Mail:	
Were you a professional or Olympic athlete? Yes [] No [] Event or sport/team	Emergency Contact: Relation	nship:		Phone:	
Event or sport/team Awards: To register for the 5k race, please visit www.kentlands.org/5k/5k.html To register for the 10k race, visit www.raceforourkids.org Participant Dues (choose only one) Participation in 1 Event \$25 one \$ Each Additional Event \$5 Late Registration* (Less 2 weeks before event) \$60 \$ * Indicates late registration allowed only if space permits in that event. Additional/Optional Costs (complete all that apply to you) Fees Number of Events Amount 10-Pin Bowling Fee for Each Event \$7 \$ Golf fee (with cart) \$39 \$ Number of Shirts 2012 MSO souvenir t-shirt (size: S_M_L_XL_2XL_*) \$10- \$15* \$10- \$10- \$10- \$10- \$10- \$10- \$10- \$10-	Gender: Male [] Female []	Status:	Returning A	Athlete [] N	ew Athlete [
To register for the 5k race, please visit www.kentlands.org/5k/5k.html	Were you a professional or Olympic athlete?	Yes []	No []		
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Total \$ Checklist ✓ Did you complete BOTH pages of the individual athlete registration form?	2012 MSO souvenir t-shirt (size: S M L XL	_2XL*)			\$
Checklist ✓ Did you complete BOTH pages of the individual athlete registration form?	Your Tax-Deductible Additional Donation Is Greatly	Appreciated!			\$
✓ Did you complete BOTH pages of the individual athlete registration form?				Total	\$
 ✓ Check the "risk level" of each event (only TWO <u>high-risk events</u> per day, except swimming, and track and field): ✓ SIGN the liability waiver on the second page of this form? ✓ Enclose a check or money order payable to: Maryland Senior Olympics (do not send cash)? 	Golf fee (with cart) 2012 MSO souvenir t-shirt (size: SM L XL Your Tax-Deductible Additional Donation Is Greatly Checklist Did you complete BOTH pages of the individual athle Check the "risk level" of each event (only TWO high-r SIGN the liability waiver on the second page of this for	v Appreciated! ete registration isk events per d orm?	\$39 \$10- \$15* form?	Number of Shirts Total ming, and track a	\$ \$ \$
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	FOR OFFICE USE ONLY Date received: Ch	eck No (heck Amount: S	S No. of E	vents

Individual Event Registration Form (cont.)

This form is for individual participatory events only. There is a separate form for team registrations. Along with filling out the first page of this form, you must also fill out this form to list the individual events you wish to compete. Please answer each column of the form for each event you are entering, including your best time, score or distance for all swimming, golf, track and field events. On Risk Level, you can enter only two high-risk events per day—except for swimming, track and field.

Medical Information

Please list or attach a summary of all medical conditions, allergies, surgeries, medications, etc. This is for your safety....

An "event" is defined as "one" activity. For example, tennis singles and doubles are two activities, as would be golf chipping and putting.

Age Group	Risk Level	Event Date (No Duplicates)	Event Full name/Description (e.g., 10-pin bowling singles, etc.)	Best Time or Score	Doubles Partner's Name and Date of Birth

Each participant must present a valid driver's license or MVA identification at check-in of their events.

Enclose Check or Money Order and Mail to:

Maryland Senior Olympics P.O. Box 12129 Baltimore, Maryland 21281

Postmark all registration materials by July 31, 2012. Incomplete entries will be returned.

Liability Waiver

The Maryland Senior Olympics Commission LTD strongly recommends that participants consult their physicians regarding practice, preparation, and competition in the Senior Olympics program. You must read and sign the following in order to participate in the Maryland Senior Olympics:

I, the undersigned participant, shall and will save and keep harmless and indemnify the Maryland Senior Olympics Commission LTD, and all other sponsors, volunteers or any of their agents or employees from and against any and all liability and claims which I may have and/or persons through me may have, such as a spouse or children, for damages of any kind or nature, including but not limited to personal injuries or death caused in whole or in part by the negligent acts of omission or commission by said indemnities acting independently or jointly in the sponsorship, conduct or operation of the 2012 Maryland Senior Olympics.

I have prepared myself for the event(s) which I have entered by practicing prior to the Maryland Senior Olympics. To the best of my knowledge and belief, I have no physical restrictions which would prohibit my participation in the events that I have selected. The Maryland Senior Olympics Commissions LTD has my permission to have a physician attend me if deemed necessary during my participation in the Maryland Senior Olympics.

I have read and understand all the information contained in the official form and the Risk Criteria as listed in the Maryland Senior Olympics registration form, which must be met in order to compete in the 2012 Maryland Senior Olympics. Fraudulent statements on this application will result in disqualification.

The Maryland Senior Olympics Commission LTD reserves the right to photograph participants for publicity purposes.

Signature of Participant: Date:	Signature of Participant:	[Date:	:
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2012 Team Registration Form

New participants <u>must</u> enclose a copy of a valid driver's license or MVA identification.

This form is for teams wishing to participate in basketball, softball and volleyball competitions. There is a separate form for individual sports registrations. Even though many athletes participate in individual sports for the Maryland Senior Olympics and National Senior Games, the team sports differ widely.

First, each team captain must apprise his players of the risk levels for basketball (medium to high), softball (medium) and volleyball (high). Secondly, athletes must carefully address any medical conditions or medications against the higher-paced team sports compared to some of the individual sports.

Here are other things you should know about team sports activities and this form:

- ✓ Completely fill out the roster form on the next page and please print clearly;
- ✓ Even though you might be entered in an individual sport, you must still be on a team roster to be eligible to play;
- ✓ Be sure to choose which sport your team is entering and the age group;
- ✓ List your medical information. Use an extra piece of paper, if necessary. This data is for your safety in case of emergency;
- ✓ Make sure your captain has read and signed the Liability Waiver, and that his/her players are aware of the agreement.
- ✓ The deadline for entry is 30 days prior to your event, otherwise there is a late-fee penalty of \$60—if a position is open.

Enclose Check or Money Order and Mail to:

Maryland Senior Olympics
P.O. Box 12129
Baltimore, Maryland 21281
Postmark all registration materials no less than 30 days prior to first event.
Incomplete entries will be returned.

Medical Information

Please list on the line below or attach a summary of all medical conditions, allergies, surgeries, medications, etc.

Liability Waiver

The Maryland Senior Olympics Commission LTD strongly recommends that participants consult their physicians regarding practice, preparation, and competition in the Senior Olympics program. You must read and sign the following in order to participate in the Maryland Senior Olympics:

Î, the undersigned participant, shall and will save and keep harmless and indemnify the Maryland Senior Olympics Commission LTD, and all other sponsors, volunteers or any of their agents or employees from and against any and all liability and claims which I may have and/or persons through me may have, such as a spouse or children, for damages of any kind or nature, including but not limited to personal injuries or death caused in whole or in part by the negligent acts of omission or commission by said indemnities acting independently or jointly in the sponsorship, conduct or operation of the 2012 Maryland Senior Olympics.

I have prepared myself for the event(s) which I have entered by practicing prior to the Maryland Senior Olympics. To the best of my knowledge and belief, I have no physical restrictions which would prohibit my participation in the events that I have selected. The Maryland Senior Olympics Commissions LTD has my permission to have a physician attend me if deemed necessary during my participation in the Maryland Senior Olympics.

I have read and understand all the information contained in the official form and the Risk Criteria as listed in the Maryland Senior Olympics registration form, which must be met in order to compete in the 2012 Maryland Senior Olympics. Fraudulent statements on this application will result in disqualification.

The Maryland Senior Olympics Commission LTD reserves the right to photograph participants for publicity purposes.

Signature of Participant: _	Date:	
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2012 TEAM ROSTER FORM (Please Print Clearly)

Team Name:	
Team Captain:	
Phone:	

SPORT: (<u>circle one</u>) Basketball \$100 Softball \$200 Volleyball \$175

AGE GROUP*: (circle one) 50-54 55-59 60-64 70-74 75-plus SEX: (circle one) Men *Age of team will be determined by the age of the youngest player, as of Dec. 31, 2012. Women

Captain ¥ 20 19 3 17 16 15 7 3 12 \rightrightarrows 70 G 2 9 ∞ 7 6 4 ω Name—Last, First (please print) Address—Street, City, State, Zip, County Birth Date Signature Phone and e-Mail MSO T-Shirt \$10-\$15*each S, M, L, XL, 2XL*

NP = Non-Playing Personnel (maximum of three)

Each participant must present a valid driver's license or MVA identification at check-in of their events.

FOR OFFICE USE ONLY Date received:
Date received:
Check No.
Check Amount: \$_