

STEP 1: ATHLETE INFO

NAME: _____
Legal First* Last

*For athletes competing at more than one state's games, please use the same first name to register with each state.

DATE OF BIRTH: ____/____/____ **AGE:** ____ **GENDER:** M or F
Month/Day/Year As of 12/31/13 (Please Circle)

E-MAIL ADDRESS:** _____

**The fusesport software requires a valid email address to process your registration. If you do NOT have an email address you can create a FREE Gmail account by visiting www.google.com and clicking on the Gmail tab.

ADDRESS: _____
P.O. Box/Street City State Zip

HOME PHONE: _____ **CELL PHONE:** _____

EMERGENCY CONTACT: _____ **PHONE:** _____

EMERGENCY CONTACT RELATIONSHIP: _____

PERSONAL PHYSICIAN: _____ **PHONE:** _____

1. How did you learn out about the **2013** Rocky Mountain Senior Games?
- | | |
|--|---|
| <input type="checkbox"/> Past Participant | <input type="checkbox"/> Direct Mailing |
| <input type="checkbox"/> PSA/Press Release | <input type="checkbox"/> RMSG Website |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Government Access TV |
| <input type="checkbox"/> Retirement Community: _____ | |
| <input type="checkbox"/> Recreation/Senior Center: _____ | |
| <input type="checkbox"/> Radio: _____ | |
| <input type="checkbox"/> Newspaper: _____ | |
| <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> *Friend/Word of Mouth: _____ | |

*If you are a NEW RMSG participant and a friend (also a 2013 RMSG participant) referred you to RMSG please list his/her name. Your friend will receive \$10 for each NEW athlete that pays the base registration fee! Limit \$50.

2. If you are a SilverSneakers® member please provide your membership #: _____

3. If you are purchasing Celebration of Athletes tickets for guests please provide your guest(s) name(s):

WAIVER AND RELEASE FROM LIABILITY 2013 ROCKY MOUNTAIN SENIOR GAMES

I, the undersigned, understand and expressly assume the dangers of the Rocky Mountain Senior Games competition(s) which I have entered. I hereby agree to indemnify, save and hold harmless Rocky Mountain Senior Games, Colorado Senior Sports Development Council, National Senior Games Association, City of Greeley, City of Greeley Parks Department, City of Greeley Leisure Services Department, Weld County Commissioners, Weld County Sheriffs Office, University of Northern Colorado, Weld County School District #6, Highland Park Lanes, Pawnee Sports Center, Work Out West, City of Westminster, Anthem Ranch Community Association/Aspen Lodge, Greeley Triathlon Club, Rocky Mountain Archery, City & County of Denver and any other sponsoring agencies or their respective agents, representatives, successors or assignees for my health, safety, loss of property or injury resulting from my participation in the Rocky Mountain Senior Games and planned special events.

I have prepared myself for the event(s) I have entered by practicing prior to the Rocky Mountain Senior Games. To the best of my knowledge, I have no physical restrictions which would prohibit my competing in the event(s) I have selected. I understand it would be in my best interest to consult my physician prior to my participation in regard to the Rocky Mountain Senior Games. Rocky Mountain Senior Games has my permission to have emergency medical personnel attend me during my participation in the Rocky Mountain Senior Games if it is deemed necessary.

I, the undersigned, grant Rocky Mountain Senior Games and its sponsors the right to release my results and phone number to the media. I understand that I will be contacted by a Rocky Mountain Senior Games representative prior to releasing my phone number to the media. PHOTO PERMISSION: I do hereby grant permission for any still or motion pictures to be used in publicity or brochures related to the Rocky Mountain Senior Games.

I have read and fully understand the refund policies as established by the Rocky Mountain Senior Games and do hereby agree to abide by those policies. I have read and understand the entry form and certify my compliance by my signature below.

Signature _____ Date _____

STEP 2: SINGLES & DOUBLES EVENT REGISTRATION

Register for an event by marking the box next to the event.

Archery Indoor

Sport Partner: Rocky Mountain Archery Fee

- | | |
|---|-----|
| <input type="checkbox"/> Compound Fingers (R) | \$2 |
| <input type="checkbox"/> Compound Release (R) | \$2 |
| <input type="checkbox"/> Recurve (R) | \$2 |

Archery Outdoor

Sport Partner: Art Pendergraft Fee

- | | |
|---|-----|
| <input type="checkbox"/> Compound Fingers (C) | \$2 |
| <input type="checkbox"/> Compound Release (C) | \$2 |
| <input type="checkbox"/> Recurve (C) | \$2 |

Badminton

Fee

- | | |
|----------------------------------|-----|
| <input type="checkbox"/> Singles | \$2 |
| <input type="checkbox"/> Doubles | \$2 |

Partner: _____

First Name Last Name

Partner Birth Year: _____

- | | |
|--|-----|
| <input type="checkbox"/> Mixed Doubles | \$2 |
|--|-----|

Partner: _____

First Name Last Name

Partner Birth Year: _____

Basketball

Fee

- | | |
|--|-----|
| <input type="checkbox"/> Free Throw Shoot | \$2 |
| <input type="checkbox"/> Hot Shot | \$2 |
| <input type="checkbox"/> Three Point Shoot | \$2 |

Bowling

Fee

- | | |
|----------------------------------|--------|
| <input type="checkbox"/> Singles | \$8.50 |
|----------------------------------|--------|

Select Singles Day/Time:

- | |
|---|
| <input type="checkbox"/> Wed, 6/5, 11am |
| <input type="checkbox"/> Wed, 6/5, 2pm |

- | | |
|----------------------------------|--------|
| <input type="checkbox"/> Doubles | \$8.50 |
|----------------------------------|--------|

Partner: _____

First Name Last Name

Partner Birth Year: _____

Select Doubles Day/Time:

- | |
|--|
| <input type="checkbox"/> Thur, 6/6, 11am |
| <input type="checkbox"/> Thur, 6/6, 2pm |
| <input type="checkbox"/> Fri, 6/7, 11am |

- | | |
|--|--------|
| <input type="checkbox"/> Mixed Doubles | \$8.50 |
|--|--------|

Partner: _____

First Name Last Name

Partner Birth Year: _____

Select Mixed Doubles Day/Time

- | |
|--|
| <input type="checkbox"/> Thur, 6/6, 11am |
| <input type="checkbox"/> Thur, 6/6, 2pm |

Most recent **Bowling Average:** _____

An average is NOT required to bowl.

Need a Doubles Partner?

You will NOT be entered in a doubles event if you do NOT have a partner listed. Click the Sports & Events tab at www.rockymountainseiniorgames.com to submit partner requests. Athletes are responsible for contacting each other and notifying the RMSG when they secure a partner.

Cycling

Sport Partner: COBRAS

Fee

- | | |
|---|-----|
| <input type="checkbox"/> 5K Time Trial | \$2 |
| <input type="checkbox"/> 10K Time Trial | \$2 |
| <input type="checkbox"/> 20K Road Race | \$2 |
| <input type="checkbox"/> 40K Road Race | \$2 |

Golf

Fee

- | | |
|--|------|
| <input type="checkbox"/> 36-Holes Scratch Play | \$60 |
| <input type="checkbox"/> 18-Holes Scratch Play | \$30 |

If there are other RMSG athletes you would like to **GOLF** with list their names: _____

Golf handicap? _____

A handicap is NOT required to golf.

Greeley Golf Annual Pass #: _____

A Greeley Golf Pass is NOT required to golf.

Pickle-ball

Fee

- | | |
|----------------------------------|-----|
| <input type="checkbox"/> Singles | \$2 |
| <input type="checkbox"/> Doubles | \$2 |

Partner: _____

First Name Last Name

Partner Birth Year: _____

- | | |
|--|-----|
| <input type="checkbox"/> Mixed Doubles | \$2 |
|--|-----|

Partner: _____

First Name Last Name

Partner Birth Year: _____

USAPA Member #: _____

USAPA Rating: _____

USAPA membership & rating NOT required.

Pickleball referees needed, PLEASE volunteer!

Singles Referee- Wed, 6/5

- | |
|--------------------------------|
| <input type="checkbox"/> 1-6pm |
|--------------------------------|

Mixed Doubles Referee-Thur, 6/6

- | | | |
|-----------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> 8am-Noon | <input type="checkbox"/> Noon-4pm | <input type="checkbox"/> 4-8pm |
|-----------------------------------|-----------------------------------|--------------------------------|

Doubles Referee- Fri, 6/7

- | | | |
|-----------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> 8am-Noon | <input type="checkbox"/> Noon-4pm | <input type="checkbox"/> 4-8pm |
|-----------------------------------|-----------------------------------|--------------------------------|

Power Walking

Fee

- | | |
|--|-----|
| <input type="checkbox"/> 400 Meter Power Walk (R) | \$2 |
| <input type="checkbox"/> 1500 Meter Power Walk (R) | \$2 |

☐ 1500 Meter Racewalk (C)

☐ 5000 Meter Racewalk (C)

\$2
\$2

☐ Singles

☐ Doubles

\$2
\$2

Partner Birth Year:

☐ 5K Foot Race

☐ 10K Foot Race

\$2
\$2

Sport Partner: Work Out West

☐ 2000 Meter Timed Event

☐ Skeet Shoot (50 Rounds)

☐ Trap Shoot (50 Rounds)

\$14
\$14

- ☐ Singles
- ☐ Doubles

\$2
\$2

Partner Birth Year:

USMS Recognition #323-R003

Entry Time*
*Not Required

Fee

<input type="checkbox"/>	50Y Backstroke (C)	_____	\$2
<input type="checkbox"/>	50Y Breaststroke (C)	_____	\$2
<input type="checkbox"/>	50Y Butterfly (C)	_____	\$2
<input type="checkbox"/>	50Y Freestyle (C)	_____	\$2
<input type="checkbox"/>	100Y Backstroke (C)	_____	\$2
<input type="checkbox"/>	100Y Breaststroke (C)	_____	\$2
<input type="checkbox"/>	100Y Butterfly (C)	_____	\$2
<input type="checkbox"/>	100Y Freestyle (C)	_____	\$2
<input type="checkbox"/>	100Y Ind. Medley (C)	_____	\$2
<input type="checkbox"/>	200Y Backstroke (C)	_____	\$2
<input type="checkbox"/>	200Y Freestyle (C)	_____	\$2
<input type="checkbox"/>	200Y Breaststroke (C)	_____	\$2
<input type="checkbox"/>	200Y Ind. Medley (C)	_____	\$2
<input type="checkbox"/>	500Y Freestyle (C)	_____	\$2
<input type="checkbox"/>	25Y Backstroke (R)	_____	\$2
<input type="checkbox"/>	25Y Breaststroke (R)	_____	\$2
<input type="checkbox"/>	25Y Elem. Backstroke (R)	_____	\$2
<input type="checkbox"/>	25Y Front Crawl (R)	_____	\$2
<input type="checkbox"/>	25Y Sidestroke (R)	_____	\$2
<input type="checkbox"/>	25Y Butterfly (R)	_____	\$2
<input type="checkbox"/>	50Y Sidestroke (R)	_____	\$2

USMS Member #: _____

USMS membership is NOT required.

- ☐ Singles
- ☐ Doubles

\$2
\$2

Partner: _____
First Name Last Name

Partner Birth Year: _____

☐ Mixed Doubles \$2

Partner: _____

First Name Last Name

Partner Birth Year:

Tennis – Tournament held May 16-18, 2013.
Register by completing the Tennis form on p. 12.

- ☐ Discus (C)
- ☐ High Jump (C)
- ☐ Javelin (C)
- ☐ Long Jump (C)
- ☐ Shot Put (C)
- ☐ Triple Jump (C)
- ☐ Pole Vault (C)
- ☐ ~~Triple Jump (C)~~

[illegible]

Triathlon

☐ 500Y Swim/9.5 Mile Bike/5K Run**Fee**

Please select the appropriate category.

- ☐ Athena-women 150+ lbs.
- ☐ Clydesdale-men 200+ lbs.
- ☐ Super Athena-women 180+ lbs.
- ☐ Super Clydesdale-men 225+ lbs.
- ☐ Not Applicable

Sport Partner: Melanie Sanford-Gillan

Fee

<input type="checkbox"/>	Arm Curl	\$2
<input type="checkbox"/>	Bench Press	\$2
<input type="checkbox"/>	Leg Press	\$2
<input type="checkbox"/>	Push Ups	\$2
<input type="checkbox"/>	Sit Ups	\$2

EVENT FEES SUBTOTAL.....

Total event fees on pages 7 & 8. Transfer total to
STEP 3: PAYMENT CALCULATION on page 9.

STEP 3: T-SHIRTS, SOCIAL EVENTS, MEALS & PAYMENT

T-SHIRTS

Athletes who pay the
RMSG Base Registration
receive **ONE FREE** T-shirt
(3-color, 50/50, unisex).
Please circle **ONE** size:

Small	Medium
Large	X-Large
2X	Donate my t-shirt

2013 T-SHIRT DESIGN



Additional t-shirts can be purchased

Size	Qty	Fee	Total
<input type="checkbox"/> Small	_____	\$6	_____
<input type="checkbox"/> Medium	_____	\$6	_____
<input type="checkbox"/> Large	_____	\$6	_____
<input type="checkbox"/> XL	_____	\$6	_____
<input type="checkbox"/> 2X		\$7	

SOCIAL EVENTS

SOCIAL EVENTS		Qty	Fee	Total
<input type="checkbox"/>	Celebration of Athletes June 6, 6pm	_____	\$12	_____
<input type="checkbox"/>	Strength Training Demo June 6, 11am	_____	FREE	\$0
<input type="checkbox"/>	Hammer Throw Clinic June 6, 2pm	_____	FREE	\$0
<input type="checkbox"/>	Rio Grande Fiesta Night June 8, 4pm	_____	\$7	_____
<input type="checkbox"/>	8-ball Tournament June 8, 9am	_____	\$5	_____
<input type="checkbox"/>	9-ball Tournament June 9, 9am		\$5	

MEALS

MEALS		Qty	Fee	Total
<input type="checkbox"/>	Lunch Thur, June 6	_____	\$5	_____
	Taco Salad, Corn Bread, Cookie			
<input type="checkbox"/>	Lunch Fri, June 7	_____	\$5	_____
	Egg Salad Sandwich, Chips, Pickle, Cake			
<input type="checkbox"/>	Lunch Sat, June 8	_____	\$5	_____
	BBQ Pork Sandwich, Potato Salad, Cottage Cheese, Cookie			
<input type="checkbox"/>	Lunch Sun, June 9	_____	\$5	_____
	Lasagna, Salad, Garlic Bread, Brownie			

PAYMENT CALCULATION

*Include payment for appropriate Base Registration fee, see dates below. If you are participating in **ONLY** Social Events OR **ONLY** purchasing t-shirts & meals, you DO NOT have to pay the Base Registration fee but must submit a paper entry form.

<input type="checkbox"/>	Early Bird Base Registration*	\$40
	POSTMARKED ON OR BEFORE MAY 6, 2013	
<input type="checkbox"/>	Late Base Registration*	\$50
	POSTMARKED MAY 7-20, 2013	
<input type="checkbox"/>	Singles & Doubles Event Fees (from page 7 & 8)	
<input type="checkbox"/>	Social Events, Meals & T-shirt Fees (amounts from left side of this page)	
<input type="checkbox"/>	Donate to CSSDC (optional) CSSDC is a 501(c)3 non-profit organization and governs Rocky Mountain Senior Games	
<input type="checkbox"/>	Processing Fee (required)	\$ 7

GRAND TOTAL** \$

****RMSG accepts ONLY credit card payment!** If you DO NOT want to mail your credit card #, sign below and an RMSG staff member will call for credit card info when your entry form is received.

PAYMENT AUTHORIZATION

Please select Credit Card Type:

☐ MasterCard ☐ Visa ☐ AMEX ☐ Discover

Credit Card Number

				-					-					-			
--	--	--	--	---	--	--	--	--	---	--	--	--	--	---	--	--	--

Expiration Date	3-digit Security # (on back of card)
--------------------	---

		/		
Month			Year	

Name on
Credit Card:

Signature: _____

Date: _____

3 WAYS TO REGISTER FOR SINGLES & DOUBLES EVENTS

Online:* www.rockymountain seniorgames.com

Mail to:* RMSG, 1010 Sixth Street, Greeley, CO 80631

Fax to:* 970-350-9898

*All registration methods require credit card payment.