



General Event Information

The 2016 Sonoma Wine Country Games are sanctioned qualifying games for the California State Senior Games. Senior Games promote healthy, active lifestyles for adults 50+.

Eligibility

All participants must be 50 on or before December 31 of the event year. There is no upper age limit. Proof of age will be required at event check in. Age divisions are in five-year age groups except where noted: 50-54, 55-59, 60-64, 65-69, 70-74, etc. Age divisions for doubles and team competitions will be determined by age of the youngest player as of December 31 of the event year.

Medals

Medals will be awarded to the top three finishers in each age category. *Social athletic events will not be awarded medals.*

Registration & Fees

Individuals may enter any sport or event subject to the entry limitations of that sport. There is a \$45 individual registration fee plus a small event fee for each sport. Each team member and partner in a doubles competition must submit an entry form and write the full name of his or her partner. Team Captains will enter their teammates information and a link will be sent to each team member for them to complete and pay their registration. Registration and event fees include: event administration and organization, venue rental and restrooms, officials, permits and sanctions, emergency medical personnel, medals, security, liability insurance, entry confirmation, event t-shirt and results administration. Please do not register for overlapping events. No schedule changes will be made to accommodate multi-sport or multi-event entrants. Refunds will not be given.

Liability Waivers

Each participant will sign a release waiver upon registration in order to participate in their event(s). Sonoma Wine Country Games is not responsible for the loss or damage of any athlete's personal belongings. The General Liability Insurance Policy only covers medical costs when an accident or injury is caused by our negligence. Each participant is responsible for his or her own medical insurance. Emergency medical assistance will be in place at some events. If the athlete must be transported by ambulance, it will be at the athlete's expense.

Registration Confirmation and Check In

All athletes and team members must report to the registration table at their sporting venue to check in prior to competing. Participants will be required to show proof of age and will be given their credentials. Additional information will be included in the confirmation letter and in correspondence closer to the event.

Equipment and Uniforms

Participants are required to provide their own equipment, athletic apparel and shoes as is customary for the sport in which they are participating. Team sports require like-color and style, numbered uniforms.

Sportsmanship

Unsportsmanlike or disorderly conduct on the part of competitors, coaches or fans will be grounds for immediate removal and disqualification without refund of fees. Please help make this a fun, family-friendly event!

Register online at: www.WineCountryGames.com

Registration Deadline:

1 week before the scheduled event for individual sports

2 weeks before scheduled event for team sports

There will be no event day registration.

Mail Registration forms to:

Sonoma Wine Country Games
30 Kawana Springs Rd.
Santa Rosa, CA 95404



Liability Release and Waiver

I, intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims against the Sonoma Wine County Games Local Organizing Committee, Council on Aging Services for Seniors, all sponsors, venues, and any and all persons and organizations affiliated therewith, for any and all injuries, disabilities or death suffered by me while traveling to and from, or participating in the Sonoma Wine County Games. I further state that I am in good physical condition and health, have consulted with a physician, as appropriate, and sufficiently trained for the events in which I will participate.

I understand that I as a volunteer, participant or spectator have a duty to advise authorized personnel of the Sonoma Wine Country Games or the providing facility personal of any unsafe conditions, equipment or environment and will refuse to participate if such condition persists.

I agree to abide by all rules, regulations and procedures issued by the Sonoma Wine Country Games including: observe all rules of play, to exercise good sportsmanship, to decline from the use of violent, offensive and abusive language and behavior, and to follow all written and oral instructions given by authorized personnel of the Games including instructions by officials. I agree and understand that failure to do so may result in ejection from the Games.

I understand that the Sonoma Wine County Games has a General Liability Policy for the event. This insurance covers medical costs only when an accident or injury is caused by negligence on the part of the games. It is expressly understood that this insurance does not cover: property loss, damage to the participant, or medical costs if an accident or injury occurs during the normal routine of competition or during travel to and from competition. Each participant is responsible for his or her medical insurance.

In the event I sustain injury or illness while participating in the Sonoma Wine Country Games, I hereby authorize licensed medical personal to perform or administer to me on an emergency basis any first-aid, medications, medical treatment or surgery that they in good faith deem necessary. All expenses incurred due to injury or illness will be performed at your expense including transport by ambulance.

I grant Sonoma Wine Country Games and their photographers permission to use my likeness in a photograph in any and all of its publications, including websites, without payment or any other consideration. I understand these materials will become the property of Sonoma Wine Country Games and may be altered, edited, copied, exhibited, published or distributed for the purpose of publicizing the Sonoma Wine Country Games now and in the future. I waive any right to royalties or other compensation.

I have read this release and before signing below and fully understand the contents, meaning and impact of this release.

Signed _____ Date _____

Printed Name _____ Date _____



Registration

Registration Deadline: 1 week before event—individual sports
2 weeks before event—team sports
Register online at: www.winecountrygames.com
All athletes are entered as individuals **no team registration**

Name: _____ Male: ☐ Female: ☐

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Email: _____ Phone : _____ Cell: _____

Birth Date: _____ Age as of 12/31/15: _____

T-Shirt Style: ☐ Unisex ☐ Women (fitted) T-Shirt Size: S M L XL XXL OptOut

Emergency Contact Name: _____ Phone: _____

Emergency Contact Relationship: _____

Fees & Payment

Registration Fee (*Partners and team members must register separately*) \$45

Swimming ~ June 18 9 am, Quinn Swim Center, Santa Rosa Junior College

☐ Non-Master swimmer Number of events _____ X \$3 _____

☐ US Masters Swimmer # _____
All events are timed finals. Time seeded for Masters & non-Masters swimmers

Events: listed in meet order

<u>Event</u>	<u>Seed Time</u>	<u>Event</u>	<u>Seed Time</u>	<u>Event</u>	<u>Seed Time</u>
1. <input type="checkbox"/> 200 Free (\$3) _____		5. <input type="checkbox"/> 50 Back (\$2) _____		9. <input type="checkbox"/> 50 Free (\$3) _____	
2. <input type="checkbox"/> 100 IM (\$3) _____		6. <input type="checkbox"/> 500 Free (\$3) _____		10. <input type="checkbox"/> 200 IM (\$3) _____	
3. <input type="checkbox"/> 50 Fly (\$3) _____		7. <input type="checkbox"/> 50 Breast(\$3) _____		11. <input type="checkbox"/> 100 Free (\$3) _____	
4. <input type="checkbox"/> 100 Breast(\$3) _____		8. <input type="checkbox"/> 100 Back (\$3) _____			

Mail in fee: \$5 (online reg is free – please call and schedule a time to come in if you need help with online registration to avoid this fee) \$5

Total _____

Make Checks Payable & Mail to: **Sonoma Wine Country Games**

30 Kawana Springs Rd., Santa Rosa, CA 95404

Credit Card: ☐ VISA ☐ MasterCard

Signature: _____

Date: _____

Credit Card Number: _____

Expiration: _____