



# 2016 Individual Registration Forms

New Participants Must Enclose a Copy of a Valid Driver's License or MVA Identification.

Please Print Clearly. Fill Out and Submit Both Forms. Registration Closes One Week Prior to Each Event.

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birth Date (month/day/year): \_\_\_\_\_ Phone: \_\_\_\_\_ e-Mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Gender: Male [ ] Female [ ] Status: Returning Athlete [ ] New Athlete [ ]

Were you a professional or Olympic athlete? Yes [ ] No [ ] Sport/Events: \_\_\_\_\_

### Please Visit These Sites to Register for . . .

- ☛ 5k race: [www.kentlands.org/5k/5k.html](http://www.kentlands.org/5k/5k.html)
- ☛ 10k race: [www.raceforourkids.org](http://www.raceforourkids.org)
- ☛ 5k and 10k cycling time trials: [www.parvillacycles.com](http://www.parvillacycles.com)
- ☛ Croquet: [www.westriverwickets.com](http://www.westriverwickets.com) or [www.gingercove.com](http://www.gingercove.com)

Participant Dues	Fees	Number of Items	Amount
Participation in 1 Event	\$25	one	\$25
Each Additional Event	\$5		\$
Additional/Optional Costs (complete all that apply to you)	Fees	Number of Items	Amount
10-Pin Bowling for Each Event	\$8		\$
Golf Fee (with cart)	\$39		\$
Your Tax-Deductible Additional Donation Is Greatly Appreciated!			\$
Mail-In Registration Fee (non-refundable)	\$10		\$10
	Total		\$
FREE! Your MSO Souvenir T-Shirt (except for team sports)! Choose Your Size: S ___ M ___ L ___ XL ___ 2XL ___			

### Did You . . . ?

- ✓ Complete BOTH sides of the individual athlete registration form?
- ✓ Check the "risk level" of each event (only TWO high-risk events per day, except swimming, and track and field)?
- ✓ SIGN the liability waiver on the back of this form?
- ✓ Include a copy of your driver's license or MVA identification?
- ✓ Enclose a check or money order payable to: Maryland Senior Olympics (do not send cash)?

### FOR OFFICE USE ONLY

Date received: \_\_\_\_\_ Check No. \_\_\_\_\_ Check Amount: \$ \_\_\_\_\_ Date Registered \_\_\_\_\_

# Individual Athlete Registration (continued)

This form is for individual participants only. There is a separate form for team registrations. You must also fill out this form to list the individual events you wish to compete. Please complete 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

For your safety, please list or attach a summary of all medical conditions, allergies, surgeries, medications, etc.

An "event" is defined as "one" activity. For example, tennis singles and doubles are two activities.

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 events.

### Enclose Check or Money Order and Mail to:

Maryland Senior Olympics  
c/o Holiday Park Senior Center  
3950 Ferrara Drive  
Wheaton, Maryland 20906

## 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, Montgomery County 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 2016 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 2016 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: \_\_\_\_\_

# Swimming

The swim event will be held Sept. 17, 2016 at the Germantown Indoor Swim Center. Here's the schedule, events, breakdown and health risks. Warm-ups are from 8-8:50 a.m. The meet begins at 9 a.m. and should be completed by 2 p.m. Check the MSO website and at sign-in on the day of the event for potential time changes. Note: You can enter only six events.

<b>Event</b>	<b>Time</b>	<b>Risk</b>
400-Yard Individual Medley	9 a.m.	High
50-Yard Backstroke	Immediately following	High
200-Yard Breaststroke	Immediately following	High
100-Yard Freestyle	Immediately following	High
200-Yard Butterfly	Immediately following	High
50-Yard Breaststroke	Immediately following	High
200-Yard Individual Medley	Immediately following	High
100-Yard Backstroke	Immediately following	High
50-Yard Butterfly	Immediately following	High
200-Yard Freestyle	Immediately following	High
100-Yard Butterfly	Immediately following	High
100-Yard Individual Medley	Immediately following	High
200-Yard Backstroke	Immediately following	High
100-Yard Breaststroke	Immediately following	High
50-Yard Freestyle	Immediately following	High
500-Yard Freestyle	Immediately following	High



## PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle) M      F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip				
Signature of Participant			Date Signed	