

ATHLETE REGISTRATION FORM

Please fill out appropriate section for your entry into the 2017 Games

DON'T FORGET!



TO BE ELIGIBLE TO PARTICIPATE IN THE 2017 WASHINGTON STATE SENIOR GAMES, YOU MUST SIGN AND DATE THE WAIVER ON THE REVERSE SIDE OF THIS PAGE AND RETURN IT ALONG WITH YOUR REGISTRATION FORMS AND PAYMENT.



PERSONAL INFORMATION



Complete the front page of the Athlete Registration Form with your personal information. Complete one form per person. Print clearly!

SPORT INFORMATION – FEE CALCULATION

Please mark a check to the right of each event you wish to enter. Then fill in the fee box accordingly.

PAYMENT INFORMATION

Entries will not be accepted without payment. Please pay with a check made payable to Washington State Senior Games, or by supplying your credit card information.

CONFIRMATION



Your Registration Confirmation will be mailed to you within two weeks. If you have any questions, please call us for assistance at (360) 413-0148.

MAIL IN YOUR COMPLETED REGISTRATION FORMS



Once you have completed your **registration form(s)*** and signed your waiver(s), mail them along with your **payment check** (unless you are paying by credit card) to:

Washington State Senior Games

P.O. Box 1487

Olympia, WA 98507-1487

*** All registration forms must be postmarked by July 11, 2017 (July 2 for Dance, July 6 for Archery and Softball). Save \$10 by mailing your Registration Forms by May 26, 2017.**



Agreement, Release & Waiver

THIS CONSENT FORM MUST BE SIGNED AND RETURNED WITH REGISTRATION FORM

AGREEMENT, RELEASE AND WAIVER OF LIABILITY

- ✧ In consideration of the acceptance of my application to participate in the Washington State Senior Games I hereby, for myself, my heirs, executors, administrators and assigns do hereby release, waive, and/or forever discharge any and all rights, claims, and causes of action for damages that may be suffered by me as the result of my preparation for and/or participation in Washington State Senior Games.
- ✧ I recognize and voluntarily accept all risks associated with my participation in the event, no matter how remote or unlikely. I realize that my activity may well include serious bodily injury, catastrophic spinal injury (including total or partial paralysis), permanent impairment, brain damage, and even death. I recognize that these injuries may be sustained by me from falling, tripping, being pushed, running, striking or being struck by a spectator, another participant, a vehicle, equipment used in the event, and the like.
- ✧ As an adult, I take full responsibility for my participation in this event and for the level at which I choose to participate. I have no impairment, physical or mental, that should preclude my participating in this event at the level that I choose. I am physically fit and capable of participating in this event at the level I choose. I understand that I can remove myself from participating in this event at any time I choose to do so.
- ✧ I do not expect Washington State Senior Games, its agents, volunteers, officers, employees, any partner cities or sponsors to coach, manage, instruct or train me for this event. I recognize that it is my personal responsibility to learn, prepare, understand and obey the rules for this activity or event.
- ✧ Prior to participating as an athlete I will inspect the facilities and equipment to be used and if I believe same to be unsafe, I will immediately report such conditions to the Sport Commissioner, Supervisor or Official connected with the Games of same and either decline to participate or assume the risk of participating.
- ✧ The undersigned expressly agrees that the foregoing Waiver and Release of all claims is intended to be as broad and inclusive as is permitted by the laws of Washington and that if any portion thereof is held invalid it is agreed that the balance shall not withstanding, continue in full legal force and effect.
- ✧ I assume all of the above risks and release, waive, discharge, hold harmless indemnify and covenant not to sue Washington State Senior Games, its Board, employees, volunteers, coaches, trainers, officials, partner cities and sponsors, or others affiliated with the Games.
- ✧ Further, I grant full permission to use my photograph, picture, likeness and/or voice to appear in any official documentary, promotional (including any and all advertisements), television, radio or film coverage of the Games without compensation.
- ✧ I consent to all emergency medical treatment as may be deemed appropriate under existing circumstances by medical personnel or personnel associated with the Games.
- ✧ I, the undersigned, have carefully read and voluntarily signed this hold-harmless Waiver and Release of all claims and fully understand its contents and meaning as full waiver and release of all claims, liability and indemnity for Washington State Senior Games, its agents, volunteers, officers, employees and any partner cities and sponsors.

I have read this Waiver of Liability and I agree to its terms.

SIGN HERE

PRINT NAME HERE

DATE

PAYMENT CALCULATION

Basic Registration Fee (DOES NOT APPLY TO GOLF)	select one	Total
I mailed my registration on or before May 26	\$ 23 <input type="checkbox"/>	
I mailed my registration after May 26	\$ 33 <input type="checkbox"/>	
Event Fee (APPLIES TO ALL SPORTS EXCEPT GOLF)	select one	
I'm registering for 1 event	\$ 9 <input type="checkbox"/>	
I'm registering for 2 events	\$ 18 <input type="checkbox"/>	
I'm registering for 3 events	\$ 27 <input type="checkbox"/>	
I'm registering for 4 events	\$ 36 <input type="checkbox"/>	
I'm registering for 5 or more events	\$ 45 <input type="checkbox"/>	
I'm registering for the Golf Tournament	\$ 52 <input type="checkbox"/>	
I would like _____ Athlete Celebration Dinner Tickets for Saturday July 22 @ \$15 each	\$15 x _____ =	
I would like to donate _____ to Washington State Senior Games		
GRAND TOTAL		

PAYMENT INFORMATION

Amount Paid: _____

☐ I am paying by check

Check Number

☐ I am paying by credit card

Credit Card Number

Expiration Date (MM/YY)

Individual & Doubles ENTRY FORM

THE WASHINGTON STATE SENIOR GAMES PERMITS OUT-OF-STATE PARTICIPANTS

Personal Information (please print)

NAME (LAST) (FIRST) (MI.)

Gender ☐ Male ☐ Female Date of Birth (MM/DD/YYYY)

ADDRESS

CITY STATE/PROVINCE ZIP/POSTAL CODE

E-mail address

Home phone Cell phone

Emergency Contact

Emergency Contact Name Phone

Miscellaneous Information

Your Shirt Size (please specify style AND size) ☐ Men's ☐ Women's
☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL

Have you been a resident of Washington State for at least 6 months of the last year? ☐ Yes ☐ No

Do you intend to stay overnight in the Olympia-Lacey-Tumwater area? ☐ Yes ☐ No

Will you be staying at a motel or B&B? ☐ Yes ☐ No

IF YES, what is the name of your place of lodging? _____

IF YES, how many nights will you be staying? _____

Where did you hear about the 2017 Washington State Senior Games? _____

What is your local or weekend newspaper? _____



Dance

PLEASE, CHECK THE BOXES TO THE RIGHT OF EACH EVENT YOU WISH TO ENTER

BALLROOM DANCE choose your level

Bronze ☐
Silver ☐
Gold ☐

Partner

Phone

 - -

☐ Formation Team

Make Your Ballroom Dance Dinner Reservation

☐ Mark this box for
your July 8 Dinner
Reservation.
*Pay at the door, on the
day of competition.*

DANCE (closed, unless otherwise noted)	OPEN	CHOOSE ONE OF EACH DOUBLE GROUP					
		AMERICAN	INTERNATIONAL	GROUP	SOLO	AM/AM	PRO/AM
Waltz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tango	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foxtrot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Viennese Waltz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rumba	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cha Cha	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
East Coast Swing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mambo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bolero	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quickstep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Samba	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paso Doble	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salsa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
West Coast Swing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Night Club 2-Step	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hustle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Argentine Tango	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Volunteers Make Our Games

Become a Senior Games Volunteer!

The Washington State Senior Games rely on volunteers. Every year, it takes nearly 200 volunteers to produce this special event. And every year our volunteers get up, show up and step up their support by helping at check-in booths, arranging signs and posters, carrying sports gear or equipment, and providing snacks and refreshments for athletes. Friendships form this way, and many volunteers treat the Games as an annual get-together for fellowship and staying in touch. Please consider volunteering. As a nonprofit organization, the Washington State Senior Games needs volunteers ALL YEAR LONG behind the scenes to help with planning and sponsorship services.

To Volunteer, contact:
Jack Kiley at 360-754-4937

