



NORTH CAROLINA SENIOR GAMES STATE FINALS 2010 OFFICIAL ENTRY FORM

Congratulations!

You are eligible to participate at the 2010 State Finals in the activities for which you qualified at a Local Game.

We look forward to your participation in this celebration of fun and fitness!

Please review the State Finals Entry Packet Before completing this form

As you prepare this Entry Form, make sure you:

1. Complete all the PERSONAL INFORMATION section.
2. **CHECK ALL** THE ACTIVITIES for which you are qualified and want to participate in. Please check with your Local Coordinator to verify your eligibility for each activity you enter. You must check an event if you qualified and wish to participate. We will not assume you will be competing just because you qualified. See the Preliminary Schedule on page 8 in the Entry Packet to determine possible conflicts. Do not register for events with direct conflicts. For doubles events, your partner's name is required. For team sports, your Team name is required.
3. If you are a SilverArtist or Cheerleader, you must submit the required SILVERARTS INFORMATION FORM with this Entry Form by August 1. Get these forms at www.ncseniorgames.org/infoforms.pdf or from your Local Coordinator.
4. It is your responsibility to verify your Entry Form has been received by NCSG by August 1. Check our website or asking your Local Coordinator.

NO activities can be added after August 5 by you or by your Local Coordinator. You will receive your *Participant Newsletter* and personal schedule by September 1. If you do not, you should contact NCSG to request another one be sent.

- North Carolina Senior Games, Inc. is committed to creating a healthy and safe environment for all participants, staff and spectators.
- We request that every participant consult his/her doctor in regard to preparation for, and competition in, Senior Games or any similar activity.
- All activities will be held in a smoke-free environment.
- To promote total health and physical fitness, events of longer duration and lower intensity are strongly recommended. High intensity types of activities are offered primarily for the conditioned, trained athlete.

This original Entry Form (no faxes or emails) must be received by NCSG by 5:00 p.m. on August 1.

The deadline is strictly enforced in fairness to all. Late entries will be returned.

**MAIL TO: NCSG State Finals
4603 Western Blvd
Raleigh, NC 27606**

I have read and understand the above registration information and understand that I must have a photo ID to check-in at all events each day.

Signature Required: _____

Visit our website at www.ncseniorgames.org

JOIN TODAY TO SUPPORT HEALTHY AGING!

Check the correct boxes below. Please enclose a separate check payable to NCSG for your tax-deductible contribution.

FRIENDS receive: A lapel pin, car decal, discounts on Senior Games programs, subscription to the NCSG Newsletter.

\$25 Individual \$40 Couple

TORCH CLUB Members receive: All the FRIENDS benefits plus: Additional discounts and a Torch Club Certificate

\$100 Individual \$175 Couple

Spirit Club Members receive: All the above benefits plus:

Free State Finals entry fee, the opportunity to present the NCSG Flag at State Finals Opening Ceremony, acknowledgement in every Newsletter, Invitation to the annual Senior Games Holiday Celebration with the Board of Directors and major contributors.

\$250 Individual \$400 Couple

Send me a lapel pin and/or car decal or Use my total gift for Senior Games programs.

THANK YOU!

HEALTH INFORMATION (OPTIONAL)

Names of Medications: _____

Medical Conditions: _____

Allergies: _____

In case of emergency, please have this medical information and proof of insurance with you at all times.

EMERGENCY CONTACTS

Name _____ Relationship _____ Phone (____) _____
Will he/she be at State Finals? YES NO

Name _____ Relationship _____ Phone (____) _____
Will he/she be at State Finals? YES NO

Name of Personal Physician _____ Phone (____) _____

LIABILITY WAIVER

Amateur Athletic Waiver and Release of Liability

In consideration of being allowed to participate in any way in the 2010 North Carolina Senior Games State Finals program, and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE North Carolina Senior Games, Inc., its officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I UNDERSTAND AND CONSENT TO HAVE MY MEDICAL INFORMATION AVAILABLE TO MEDICAL PROVIDERS DURING THE GAMES.

By entering the North Carolina Senior Games State Finals, I grant NCSG and its sponsors the right to use my name, quotes, and any pictures taken of me during State Finals without remuneration.

I Have Read This Release	I Have Read This Release	
_____	_____	_____
Printed Name	Signature	Date Signed

This Waiver MUST be signed and dated to process this form.