



# Montco. Senior Games REGISTRATION FORM

Please Complete Both Sides - Detach & Return With Payment  
or Register Online at [www.MontCoSeniorGames.com](http://www.MontCoSeniorGames.com)

What year did you first compete? (1986-2018) Year: _____ OR <input type="checkbox"/> First Time Contestant	<b>Register by April 19th to be guaranteed a t-shirt.</b> CHECK T-SHIRT SIZE: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL <input type="checkbox"/> NO t-shirt
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NAME \_\_\_\_\_  MALE  FEMALE  
 (LAST) (M.I.) (FIRST)

ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF RETIREMENT / ASSISTED LIVING COMMUNITY \_\_\_\_\_

TELEPHONE: Home ( \_\_\_\_\_ ) \_\_\_\_\_  
 Cell ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Are you taking any medications that the MCSG Committee should know about?  
 \_\_\_\_\_

BIRTH DATE: _____ - _____ - _____ month date year Age on 12/31/19: _____
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Who is your emergency contact?  
 Name: \_\_\_\_\_  
 Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Do you require any special physical accommodations to participate in the MCSG? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please explain: _____
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### CODE OF CONDUCT

I agree to abide by the rules and procedures of the facilities where MCSG events are held. At all times, I will conduct myself in a civil, respectful manner and show good sportsmanship at all times. If I do not conduct myself in the previously stated manner MCSG has the right to remove me from competition.

### RELEASE AND WAIVER OF LIABILITY

To the best of my knowledge, information and belief, I have no physical restriction which would prohibit my participation in the events that I have selected in the Montgomery County Senior Games (MCSG) which are listed on my registration form.

I have prepared myself for the event(s), which I entered by practicing prior to the MCSG. I am participating in these events voluntarily and at my own risk. I agree not to sue the MCSG Committee and any other co-sponsoring organization or any of their representatives for any injury or any other damages to me resulting from my participation in this year's events held at the Montgomery County Community College in Blue Bell, PA and any other local facilities.

If a lawsuit is initiated on my behalf against the MCSG Committee or any other co-sponsoring organization and it results in a monetary award of damages to me or any other persons or legal entity, I agree to reimburse MCSG Committee or any co-sponsoring organization for any funds required to be paid by them.

The Committee has my permission to have medical professionals and/or certified emergency medical personnel attend me if it is deemed necessary for my health, welfare and safety.

I hereby consent to allow my picture or likeness to appear in any official document, sponsor advertisement and/or exclusive television coverage of the Montgomery County Senior Games in any manner incidental to my participation in the Montgomery County Senior Games without compensation to me.

**By signing this form, I agree to abide by the printed game rules and those stated by the event leader.**

SIGN NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

### CALCULATE YOUR FEES - PLEASE CHECK ALL THAT APPLY:

<input type="checkbox"/>	I will compete AND attend the Friday luncheon	\$20 (res) / \$25 (non-res)
<input type="checkbox"/>	I will compete only, no luncheon ticket needed	\$10 (res) / \$15 (non-res)
<input type="checkbox"/>	TOTAL FEES DUE	\$

Make your checks payable to "U.D. - MontCo. Senior Games" or pay by credit card.

PAYMENT METHOD: [ ] CHECK # \_\_\_\_\_ [ ] Visa [ ] MasterCard [ ] Discover

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_ V # \_\_\_\_\_ (last 3 digits on back of card)

Return payment & signed registration form to:  
 Name on card (please print) SENIOR GAMES COMMITTEE, c/o 801 Loch Alsh Ave., Fort Washington, PA 19034-1697



# PRE-REGISTRATION IS REQUIRED FOR ALL EVENTS & THE LUNCHEON.

*please see EVENT RULES on pages 4-6 prior to making selections*

DAY	CHECK	EVENT	TIME	LOCATION (see page 7)
MON.	<input type="checkbox"/>	<b>GOLF</b> Partners: _____	call (215) 643-1600 x3241 for tee-time, 7am-9am	Lederach Golf Club
MON.	<input type="checkbox"/>	<b>PICKLEBALL - DOUBLES</b> <input type="checkbox"/> Men's Partner's Name: _____ (Partner must register separately!) <input type="checkbox"/> Women's Partner's Name: _____ (Partner must register separately!) <input type="checkbox"/> I do not have a partner, but would be willing to partner with someone if anyone is available.	8:00 am - Men's & 11:00 am - Women's	XL Sports
MON.	<input type="checkbox"/>	<b>HORSESHOES</b>	1:30 pm	Wentz Run Park
MON.	<input type="checkbox"/>	<b>BOCCE</b> check location: <input type="checkbox"/> Greater <b>FULL</b> in CC Park <input type="checkbox"/> Eagleville Park	4:00 pm	Greater Plymouth CC Park/ Eagleville Park
TUES.-THURS.	<input type="checkbox"/>	<b>PAR 3 GOLF</b>	Arrive between 9:00 am - 10:00 am	Alverthorpe Park
TUES.-THURS.	<input type="checkbox"/>	<b>MINI GOLF</b>	Arrive between 9:00 am - 10:00 am	Alverthorpe Park
TUES.	<input type="checkbox"/>	<b>TENNIS – MEN'S SINGLES</b>	players will be notified of times	MCCC – Tennis Courts
TUES.	<input type="checkbox"/>	<b>ORIENTEERING</b> check one: <input type="checkbox"/> 10:00am <input type="checkbox"/> 11:00am		Lower Perkiomen Valley Park
TUES.	<input type="checkbox"/>	<b>ARCHERY</b>	11:00 am	Mason's Mill Park
TUES.	<input type="checkbox"/>	<b>BADMINTON</b>	1:00 pm	MCCC
TUES.	<input type="checkbox"/>	<b>SWIMMING EVENTS (6)</b> check events: <input type="checkbox"/> 50-Freestyle <input type="checkbox"/> 50-Backstroke <input type="checkbox"/> 50-Breaststroke <input type="checkbox"/> 100-Medley <input type="checkbox"/> 200-Freestyle <input type="checkbox"/> 400-Freestyle	2:30 pm	Greater Plymouth CC Pool
TUES.	<input type="checkbox"/>	<b>OUTDOOR BASKETBALL</b> check events: <input type="checkbox"/> Foul Shot <input type="checkbox"/> Hot Shot	6:00 pm	Parkside Place Complex
WED.	<input type="checkbox"/>	<b>TABLE TENNIS</b>	8:30 am	MCCC
WED.	<input type="checkbox"/>	<b>BILLIARDS</b>	10:00 am	Markley Billiards
WED.	<input type="checkbox"/>	<b>TENNIS - DOUBLES</b> <input type="checkbox"/> Men's Partner Name: _____ (Partner must register separately!) <input type="checkbox"/> I do not have a partner, but would be willing to partner with someone if anyone is available.	players will be notified	MCCC – Tennis Courts
WED.	<input type="checkbox"/>	<b>BOWLING</b> check location: <input type="checkbox"/> Facenda-Whitaker Lanes (2:00 pm) <input type="checkbox"/> Limerick Bowl (1:00 pm)		Facenda-Whitaker/Limerick Bowl
WED.	<input type="checkbox"/>	<b>RUNNING EVENTS (4)</b> check events: <input type="checkbox"/> 100-Meters <input type="checkbox"/> 400-Meters <input type="checkbox"/> 800-Meters <input type="checkbox"/> 1600-Meters	6:00 pm	Gwynedd Mercy University
THURS.	<input type="checkbox"/>	<b>SHUFFLEBOARD</b>	8:30 am	MCCC
THURS.	<input type="checkbox"/>	<b>INDOOR BASKETBALL</b> check events: <input type="checkbox"/> Foul Shot <input type="checkbox"/> Hot Shot	9:30 am	MCCC
THURS.	<input type="checkbox"/>	<b>CROQUET</b>	12:00 pm	Mennonite Heritage Center
THURS.	<input type="checkbox"/>	<b>DARTS</b>	2:00 pm	Indian Valley YMCA
<b>FRIDAY DROP-IN EVENTS</b>			8:45 - 10:45 am (10:30 am for walking)	MCCC - Health Sciences Center
check events: <input type="checkbox"/> Football Throw <input type="checkbox"/> Softball Throw <input type="checkbox"/> Stationary Bike <input type="checkbox"/> Walking				

