



REGISTRATION FORM

NAME: _____ GENDER: _____

E-MAIL ADDRESS: _____ Driver License # _____

DATE OF BIRTH: _____ AGE AS OF DEC. 31, 2019: _____ ADULT T-SHIRT SIZE (S - XXXL): _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

PRIMARY PHONE: _____ ALTERNATE PHONE: _____

EMERGENCY CONTACT NAME: _____ RELATIONSHIP: _____

DAY PHONE: _____ NIGHT PHONE: _____

DOCTORS NAME: _____ PHONE: _____

MEDICATIONS: _____

ALLERGIES/MEDICAL CONDITIONS: _____

WAIVER

In consideration of the acceptance of my application to participate in the *North Texas 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 the 2019 North Texas 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 that 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 the Senior Sports Festival, 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 some to be unsafe, I will immediately report such condition(s) to the Sport Commissioner, Supervisor, or Official connected with the Festival 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 Texas 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 North Texas Senior Games, Midwestern State University, North Texas Rehabilitation Center, Village Bowl, Weeks Park Golf Course, City of Wichita Falls and/or Wichita Falls Parks & Recreation, Wichita Falls Independent School District, any of the organizations board, employees, volunteers, coaches, trainers, officials, partner cities and sponsors, or others affiliated with the Festival.

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 North Texas Senior 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 Festival.

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 the Senior Sports Festival, its agents, volunteers, officers, employees, and any partner cities, and sponsors.

Participant Signature

Date

Participant Name (print)

Date

North Texas Senior Games Photograph/Video Waiver

As a participant in the North Texas Senior Games I give permission and consent to allow photographs and/or videos, to be taken of myself during the 2019 North Texas Senior Games to be held May 16-20, 2019 on the MSU campus and partner sites. I further give my permission and consent that any such photographs and videos may be published and used by Midwestern State University and/or North Texas Senior Games and its agents, to illustrate and promote the senior games experience and events.

Signed _____ Date _____

2019 NORTH TEXAS SENIOR GAMES ENTRY FORM

City of Dallas Senior Games registration fee is \$25 plus an additional cost per event after 2nd event. **Fees are per event, per person.** Athletes must have a partner to enter doubles events. During registration, you must enter your partners name when asked, doubles will not be assigned. **Each partner or team member must complete their own registration form.** Age Category: _____

Swimming \$4 each

- 50 BACKSTROKE
- 100 BACKSTROKE
- 200 BACKSTROKE
- 50 BREASTSTROKE
- 100 BREASTSTROKE
- 200 BREASTSTROKE
- 50 BUTTERFLY
- 100 BUTTERFLY
- 50 FREESTYLE
- 100 FREESTYLE
- 200 FREESTYLE
- 500 FREESTYLE
- 100 INDV MEDLEY
- 200 INDV MEDLEY

Table Tennis \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Golf \$25 each

- MEN
- WOMEN

Track & Field \$4 each

- 50M
- 100M
- 200M
- 400M
- 800M
- 1500M
- 1500M POWER WALK

MEN

- DISCUS
- SHOT PUT
- HIGH JUMP
- LONG JUMP

WOMEN

- DISCUS
- SHOT PUT
- HIGH JUMP
- LONG JUMP

Billiards \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Dominoes \$4 each

- MEN
- WOMEN
- MIXED

Partner Name: _____

Horseshoes \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Forty-Two(42) \$4 each

- MEN
- WOMEN
- MIXED

Partner Name: _____

Washers \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Basketball \$4 each

FREE THROW

- MEN
- WOMEN

3 ON 3

- MEN
- WOMEN

AROUND THE WORLD

- MEN
- WOMEN

Bowling \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Cycling \$4 each

MEN

- 5K TIME TRIAL
- 10K TIME TRIAL

WOMEN

- 5K TIME TRIAL
- 10K TIME TRIAL

Pickleball \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

Tennis \$4 each

- MIXED DOUBLES

MEN

- SINGLES
- DOUBLES

WOMEN

- SINGLES
- DOUBLES

Partner Name: _____

PAYMENT INFORMATION

Registration Fee = \$25.00

____ Attending Opening Ceremony (Saturday @ 7)

Additional Shirts = \$____
(\$10 x # of shirts)

____ Attending Athlete Social (Saturday @ 7)

Total Event Fees = \$____

Donation = \$____

TOTAL = \$_____

Payment Information:

Date Received: _____

Payment Type: Cash ____ Check ____ Credit Card ____

