

**Mineral County Aging & Family Services
2013 Senior Olympics Registration**

JUNE 4th – 7th Potomac State College, Keyser, WV

INSTRUCTIONS: Each individual registrant (i.e. competitor, husband or wife) must complete separate registration forms. Registrants must be 55 years of age or older. **Please list age as of June 4th, 2013.** More forms are available at the office or various senior nutrition sites. For more information call 304-788-5467.

REGISTRATION DEADLINE: May 30, 2013

Please be sure to complete all information on the registration form. Please print CLEARLY.

Name _____ Home Phone _____
Address _____ AGE _____ Sex: Male ___ Female ___
City _____ County _____ State _____ Zip _____
E-Mail _____

Please indicate T-Shirt size Small ___ Medium ___ Large ___ X-Large ___ XX-Large ___

LIABILITY WAIVER FORM (All registrants must sign this waiver form)

I, the undersigned participant, hereby agree to indemnify and hold harmless Aging & Family Services of Mineral County, Potomac State College, and the sponsors, their agents, employees, representatives, volunteers, and assigns from any and all actions, or claims of whatsoever kind or nature which I or my representatives or assigns may have or at any time in the future have as a result of any injury arising out of my participation in the Senior Olympics. I warrant and represent to the sponsors that I have prepared myself for the events which I have entered by practicing the same prior to my participation in the Senior Olympics. I warrant and represent that I am in good physical health and condition and I am physically able to compete in the events I have selected. I know of no physical restrictions whatsoever which would prohibit my participation in the events I have selected. I have been advised by the sponsors that it would be in my best interest to consult my physician prior to my preparation in regard to my participation in the Senior Olympics. I recognize and understand that the preparation and the competition in some events may necessitate strenuous physical activity, and could possibly activate any unrecognized pre-existing conditions which I may have, thereby resulting in serious or life-threatening physical harm to me. The Senior Olympics has my permission to have a physician/EMT/Paramedic treat me if needed during my participation in the Senior Olympics.

Signed _____ Date _____

PLEASE COMPLETE BOTH SIDES

REGISTRATION FEE: \$25 due when this form is turned in.

Olympic officials reserve the right to postpone, cancel or resolve disputes in any events. Please check the events you wish to enter – you may enter as many events as you would like. Age categories will be determined by the number of participants in each event. Age categories may vary from one event to another. A minimum of five (5) participants will be needed or an individual event will be cancelled.

New for 2013 - Participants may only enter five items in baking and crafts category.

Baking (Already Baked)

- _____ Pie
- _____ Cake
- _____ Cookies
- _____ Canned Relishes
- _____ Breads
- _____ Salads
- _____ Candy
- _____ Other

Miscellaneous

- _____ Afghans
- _____ Scrap Books
- _____ Crochet/Knitting
- _____ Quilts
- _____ Wood
- _____ Fabric Crafts
- _____ Painting/Drawing/Photography
- _____ Embroidery Crewel
- _____ Other Crafts
- _____ Needlework Plastics
- _____ Artificial Flowers
- _____ Live Plants

Participants may only enter up to five items in Baking and five in Miscellaneous

Talent Event (5 Minute maximum)

- _____ Comedy Contest - Reading
- _____ Dance
- _____ Musical/Instrumental/Vocal
- _____ Ugly Leg Contest

In-Door Events

- _____ Soccer Kicking
- _____ Wiffle Ball Toss
- _____ Bean Bag Toss
- _____ 20 Yard Dash
- _____ Standing Long Jump
- _____ Golf Putting
- _____ Basketball Free Throws
- _____ Basketball Hot Shot
- _____ Spelling Bee

- _____ Bowling

Field Events

- _____ Softball Throw
- _____ Frisbee Throw
- _____ Archery
- _____ Bocce Roll
- _____ Football Throw
- _____ 40 Yard Dash
- _____ Horse Shoes
- _____ Ladder Ball
- _____ Billiards
- _____ Ping Pong
- _____ Bocce
- _____ Texas Hold'em Poker
- _____ Phase Ten
- _____ Scrabble

(Only sign up for one - because of facilities and time, participants can only play one event)

(Above 4 events will be held at the same time- Only sign up for one)

Please drop completed registration form and payment at your nearest nutrition site or mail to:

Aging & Family Services Olympics
1 South Main Street
Keyser, WV 26726

Registration
Additional T-Shirts
Guest Picnic (6/5)
Guest Banquet (6/7)

\$25 (required)
\$ 10 each - optional
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TOTAL ENCLOSED _____

Please indicate the name of any guest you will have attending the picnic or banquet