

# 2010 NATIONAL SENIOR GAMES CHAMPIONSHIPS & EUFLEXA HOCKEY CLASSIC – We Welcome our Neighbors to the North!



Registration must be postmarked by September 3, 2010

Mail Completed Registration Form and Payment to:

(We cannot be responsible for misdirected mail)

Monroe County Sports Commission/NSGA 2010 Championships  
333 N Plymouth Ave, Rochester, NY 14608

## INDIVIDUAL/DOUBLES REGISTRATION FORM

(Golf, Pickleball)

### INSTRUCTIONS

- Please complete both pages. Forms **will not be accepted** if the participant waiver is not signed.
- Athletes may only register for one sport. Within each sport, you may register for unlimited events.
- Mail both completed pages to the address above
- If registering for doubles, both partners must complete a registration form and pay the registration fee.

### PARTICIPANT INFORMATION (Please print clearly):

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Init: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt/Lot #: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_ E-Mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Night Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

State Representing (You may choose any state – it does not have to be the state you live in): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Did you compete at a NSGA Local, State or Regional Senior Games in the sport you are registering for?  
(If so, list year and game name): \_\_\_\_\_

If you did not compete at a NSGA games, please list any other competitions you have competed in for the sport which you are registering. (List year and game name): \_\_\_\_\_

### REGISTRATION FEES:

*(must be postmarked by September 3, 2010)*

Golf (per person): \$155  
Pickleball: \$55

**Team Sports:** Curling, Bowling and Ice Hockey team members need to use the Team Reg. Form.

Entry fees are non-refundable. Entry fees must accompany registration form & be paid in full.

### METHOD OF PAYMENT:

Check or Money Order payable to **Monroe County Sports Commission\***

Visa

Mastercard

American Express

Card Number

Exp. Date:       Signature: \_\_\_\_\_

Credit Card

Billing Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

\*Charge will appear on your credit card statement as being from the National Senior Games Association. \$25 processing fee plus additional costs associated with collections of funds will be assessed for NSF check.

**FOR OFFICE USE ONLY:** Amount Rec'd: \_\_\_\_\_ Check/M.O.#: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ CC Auth# \_\_\_\_\_

## 2010 NATIONAL SENIOR GAMES CHAMPIONSHIPS & EUFLEXXA HOCKEY CLASSIC

### INDIVIDUAL/DOUBLE SPORT SELECTION (Maximum one sport):

**Please check the event(s) you want to register for:**

<b>Two Person Golf</b>	<b>Pickleball</b>
<ul style="list-style-type: none"> <li>Teams of two must be single gender.</li> <li>You must write in the name of your partner.</li> <li>Golfers must present their handicap card at check in.</li> </ul> <p><input type="checkbox"/> 2 Person Team Golf</p> <p>Partner: _____</p> <p>Please enter your GHIN Number: _____</p>	<ul style="list-style-type: none"> <li>Competitors may enter one, two or all three events.</li> <li>If you are entering doubles or mixed doubles, please write in your partner's name.</li> </ul> <p><input type="checkbox"/> Singles</p> <p><input type="checkbox"/> Doubles</p> <p style="margin-left: 20px;">Partner: _____</p> <p><input type="checkbox"/> Mixed Doubles</p> <p style="margin-left: 20px;">Partner: _____</p> <p>Are you a USAP member? If so, please enter your ID #: _____</p> <p>USAP ID: _____</p>

#### **PARTICIPANT WAIVER (MUST BE SIGNED):**

In consideration of my participation in the 2010 National Senior Games Championships & Euflexxa Hockey Classic, hosted by the U.S. National Senior Sports Organization d.b.a. the National Senior Games Association (NSGA), I agree to assume the risks incidental to such participation (which include, but are not limited to, property damage, bodily injury and death) and on my own behalf and on behalf of my heirs, executors and administrators release and forever discharge the released parties defined below of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with my participation in such activity and further agree to indemnify and hold each of the released parties harmless against any and all such liabilities, claims, actions, damages, costs or expenses including, but not limited to, all attorney's fees and disbursements.

The released parties are the NSGA, related and affiliated companies and the officers, directors, employees, agents, representatives, volunteers, successors and assigns of each of the foregoing entities. I understand that this release and indemnity agreement includes any claims based on negligence, action, inaction or fault of any of the above released parties and covers bodily injury (including death) and property damage, whether suffered by me before, during or after such participation. This release agreement shall be construed to be as comprehensive as is allowed by law, as severable, the invalidity of any portion of which shall not affect any other portion; and shall not establish a legal or other relationship between or among the persons released by this agreement. I declare that I am physically fit and have the skill level required to participate in this particular event. I further authorize medical treatment for myself at my cost if the need arises.

I further grant NSGA, their sponsors and marketing partners as well as the media the right to photograph, videotape and/or otherwise record me and further to use my name, face, likeness, voice, appearance, and personal data for any purpose including, but not limited to, exhibitions, publicity, advertising and promotional materials without reservation or limitation. Said parties are, however, under no obligation to exercise the rights set forth in this paragraph.

This agreement shall be governed by the laws of the State of Louisiana and any legal action relating to or arising out of this Agreement shall be commenced and maintained in the Nineteenth Judicial Court, Parish of East Baton Rouge and State of Louisiana. The parties hereto consent to the jurisdiction of such court and to Service of process outside of the State of Louisiana.

Your signature is required in order to complete the registration process and further indicates that all the information on this form is accurate. Alteration of the form is not permitted.

\_\_\_\_\_  
Print Legal Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date