



# 2021 INDIVIDUAL REGISTRATION FORM

NEW PARTICIPANTS - ENCLOSE A COPY OF A VALID DRIVER'S LICENSE OR MVA IDENTIFICATION.

**PLEASE PRINT CLEARLY. FILL OUT AND SUBMIT BOTH SIDES. REGISTRATION CLOSSES TWO WEEKS PRIOR TO EACH EVENT OR WHEN CAPACITY IS REACHED.**

FULL NAME:

STREET ADDRESS:

CITY:

COUNTY:

STATE:

ZIP:

BIRTH DATE (MO/DAY/YR):

PHONE:

E-MAIL:

EMERGENCY CONTACT:

RELATIONSHIP:

PHONE:

GENDER:

MALE  FEMALE

STATUS:

RETURNING ATHLETE

NEW ATHLETE

Were you a professional or Olympic athlete? YES  NO  Sport/Events:

## PLEASE VISIT THESE SITES TO REGISTER FOR...

▪ **5K RACE:**

[kentlandsfoundation.org/annual-5k](http://kentlandsfoundation.org/annual-5k)

▪ **10K RACE:**

[raceforourkids.org](http://raceforourkids.org)

▪ **CROQUET:** [westriverwickets.com](http://westriverwickets.com) or [gingercove.com](http://gingercove.com)

### PARTICIPANT DUES

	FEES	NO. OF ITEMS	AMT.
First Event (check your sport(s), event with the highest fee)	\$15   \$30   \$40	one	\$
Each Additional Event	\$5		\$
Team Member, Team:	\$5		\$

### ADDITIONAL/OPTIONAL COSTS

#### COMPLETE ALL THAT APPLY TO YOU

	FEES	NO. OF ITEMS	AMT.
Non-Maryland resident (n/a for non-qualifying events)	\$10	one	\$
10-Pin Bowling for Each Event	\$8		\$
Golf Fee (with cart)	\$50	one	\$

*YOUR TAX-DEDUCTIBLE ADDITIONAL DONATION IS GREATLY APPRECIATED!*

Mail-In Registration Fee	\$10		\$10
<b>SEE REFUND POLICY ON PAGE 4</b>			<b>TOTAL</b>
			\$

### ENCLOSE CHECK/MONEY ORDER TO:

Maryland Senior Olympics  
c/o Holiday Park Senior Ctr  
3950 Ferrara Dr.  
Wheaton, MD 20906

**ALL ATHLETES WILL  
RECEIVE THIS GILDAN  
HAMMER 100% COTTON  
LONG SLEEVE SHIRT**

**CIRCLE YOUR SIZE:**

**S M L XL 2XL 3XL**



### FOR OFFICE USE ONLY

DATE RECEIVED:

CHECK NO.

CHECK AMOUNT: \$

DATE REGISTERED

**1 OF 2 OVER>**

# 2021 INDIVIDUAL REGISTRATION CONTINUED...

## MEDICAL INFORMATION

Please list or attach a summary of all medical conditions, allergies, surgeries, medications, etc.

## EVENT(S) AN "EVENT" IS DEFINED AS ONE ACTIVITY. I.E., TENNIS SINGLES AND DOUBLES ARE TWO ACTIVITIES.

Please complete each column of the form for each event you are entering. Include best time/distance for swimming and track and field events and skill level for pickleball. Your age group is determined by your age as of Dec. 31, 2021.

AGE	EVENT DATE (NO DUPLICATES)	EVENT FULL NAME (I.E., BOWLING, SINGLES, ETC.)	TIME/DISTANCE/ SKILL LEVEL	DOUBLES PARTNER'S NAME & DOB

Each participant must present a valid driver's license or MVA identification at check in of events.

## ENCLOSE CHECK OR MONEY ORDER AND MAIL TO:

Maryland Senior Olympics c/o Holiday Park Senior Center | 3950 Ferrara Drive | Wheaton, Maryland 20906

## LIABILITY WAIVER

I, the undersigned participant, shall and will save and keep harmless and indemnify the Maryland Senior Olympics Commission LTD, Montgomery County and all other sponsors, volunteers or any of their agents or employees from and against any and all liability and claims which I may have and/or persons through me may have, such as a spouse or children, for damages of any kind or nature, including but not limited to personal injuries or death caused in whole or in part by the negligent acts of omission or commission by said indemnities acting independently or jointly in the sponsorship, conduct or operation of the 2021 Maryland Senior Olympics.

I have prepared myself for the event(s) which I have entered by practicing prior to the Maryland Senior Olympics. To the best of my knowledge and belief, I have no physical restrictions which would prohibit my participation in the events that I have selected. The Maryland Senior Olympics Commissions LTD has my permission to have a physician attend me if deemed necessary during my participation in the Maryland Senior Olympics.

An inherent risk of exposure to COVID-19 exists in any place where people gather. COVID-19 is an extremely contagious disease that can lead to severe illness and death. You assume all risks, hazards, and dangers arising from or relating in any way to the risk of contracting a communicable disease or illness - including, without limitation, exposure to COVID-19 or any other bacteria, virus, or other pathogen capable of causing a communicable disease or illness, whether that exposure occurs before, during, or after the event, and regardless of how caused or contracted - and you hereby waive any and all claims and potential claims against Maryland Senior Olympics.

I have read and understand all the information above. Fraudulent statements on this application will result in disqualification. The Maryland Senior Olympics Commission LTD reserves the right to photograph participants for publicity purposes.

SIGNATURE OF PARTICIPANT

DATE