



Ministry of Social Care, Constituency Empowerment and Community Development

DEPARTMENT OF CONSTITUENCY EMPOWERMENT
4th Floor, Warrens Office Complex, Warrens, St. Michael
Tel: (246) 310-1642/1637 Fax: (246) 417-1317



16TH NATIONAL SENIOR GAMES 2017

REGISTRATION FORM

PLEASE PRINT

LAST NAME: First Name:

Middle Name: Male Female

Mailing Address:

Date of Birth (mm/dd/yyyy): National Registration #:

Telephone: (H) (W) (Cell)

E-mail:

Is this your first time competing? Yes No, I last competed in (year)

T-Shirt Size (please circle): Small Medium Large XL 2XL

In case of emergency, please contact (NAME):

Telephone: (H) (W) (C):

Do any of the following apply to you? If so, please tick (v):

- Asthma ( ) Hypertension ( ) Allergies ( )
Heart Disease ( ) Diabetes ( ) Other.....

Are you using medication? (Yes/No) If yes, please state the medication.

Are there any activities from which you should be restricted while at National Senior Games events?

Please give details:

PLEASE COMPLETE THE FORM BELOW WHICH WILL BE STAMPED AND RETURNED TO YOU.

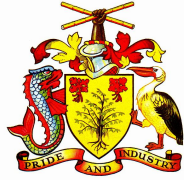
RECEIPT

This is to acknowledge receipt of registration form for the National Senior Games 2016 on behalf of:

NAME: LAST FIRST MIDDLE

DATE OF BIRTH:

OFFICIAL USE ONLY



Official Stamp

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NATIONAL SENIOR GAMES 2017 - RELEASE FORM

I (STATE NAME)..... am at least forty (40) years old and have submitted the attached application for participation in the National Senior Games 2017. I agree to abide by the rules of the Games and the decisions of the Games' officials.

The Ministry of Social Care, Constituency Empowerment and Community Development has my permission, (both during and any time thereafter) to use my likeness, name, voice or words in either television, radio, film, newspapers, magazines and other media, and in any form, for the purpose of advertising or communicating the purposes and activities of the Games and/or applying for funds to support these purposes and activities.

I declare and warrant that to the best of my knowledge and belief, I am physically and mentally able to participate in the Games. I also declare that a licensed physician has certified that I am fit to participate based on an independent medical examination and that there is no medical evidence which would prevent me from participating in the National Senior Games 2017.

I agree that the Games' organizers, sponsors and officials shall NOT be liable for any injury, loss or damage however caused which I may incur as a result of my participation in the Games or my presence at the sports venues during the competition. I hereby release the above parties from any and all such liability.

If, during my participation in the National Senior Games 2017, I should need emergency medical treatment, and I am not able to give my consent or make my own arrangements for that treatment because of my injuries, I authorize the Ministry to take whatever measures are necessary to protect my health and well-being, including, if necessary, hospitalization.

I have read this form and fully understand the provisions of this release that I am signing. I understand that by signing this document, I am saying that I agree to the provisions of this release.

.....
Signature of Participant

.....
Date

# EVENTS

PLEASE TICK (✓) IN THE COLUMN FOR YOUR AGE GROUP, TO INDICATE EVENTS IN WHICH YOU WISH TO COMPETE. (MAXIMUM OF FIVE (5) EVENTS OF WHICH (AT LEAST) ONE MUST BE A FIELD EVENT. (NB: Age group refers to your age at December 31, 2017). Points are allocated for all events.

EVENTS	AGE GROUPS								
	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
50M									
100M									
200M									
400M									
800M									
1500M									
600 WALK FEMALE (OPEN)									
1200 WALK MALE (OPEN)									
WHEELCHAIR RACE (OPEN)									
5K ROAD WALK									
5K ROAD RUN									
CRICKET BALL THROW	N/A	N/A	N/A	N/A					
SHOT PUTT									N/A
DISCUS									N/A
JAVELIN							N/A	N/A	N/A
HIGH JUMP	N/A	N/A			N/A	N/A	N/A	N/A	N/A
LONG JUMP	N/A	N/A							N/A
STANDING LONG JUMP	N/A	N/A	N/A	N/A					N/A
3000M OPEN						N/A	N/A	N/A	N/A
NETBALL									
BASKETBALL									
ARCHERY									
TENNIS									
TABLE TENNIS									
CYCLING									
DOMINOES, HEARTS, 13 HAND TONK									
ROAD TENNIS									
<b>TOTAL</b>									

N/A = event not available in age group