

Union-Snyder County Senior Olympic Games

The Union-Snyder County Senior Olympic Games is a recreational yet competitive experience, promoting health and fitness for people age 50 and over. Gold, silver, and bronze medals will be awarded to the top three finishers in each event for each age group, unless indicated otherwise. All participants will receive a commemorative T-shirt. Outdoor events will not be held during rainy or dangerous weather conditions. Decisions to cancel are generally made the day before an event, and participants will be notified via phone or email. Canceled events may be rescheduled if possible. All events are tobacco, alcohol, and substance free. Due to health concerns of all participants, smoking will not be permitted at or during any of the events indoors or outdoors.

- Eligibility

Participants must be 50 years of age or older as of December 31, 2011. Age groups for females and males are 50-54, 55-59, 60-64, 65-69, 70-74, 75-79 and 80+. The event coordinators for the Union-Snyder County Senior Olympic Games reserve the right to consolidate age divisions for competitions based on insufficient entries, modify rules and formats, or cancel events. It is possible that a participant may be scheduled to compete with those in a younger age group; however, such competition will not affect the older participant's standing in his or her own age group. All participants must actually compete to be eligible for a medal.

- Registration

To register, complete the entry form, event selection form, medical information form, sign the participant release form, and send with payment to the address below. All registrations must be received by August 19, 2011. No registrations will be accepted on the day of an event. Each participant must complete the entire entry form and pay the \$5 registration fee, including those who are entering as doubles or partners. Participants who are entering as doubles or partners may submit both registration forms at the same time. Please do NOT mail cash. Checks should be made payable to AA/Senior Olympics. Send entry forms and checks to: Senior Olympics Coordinator, Union-Snyder Agency on Aging, Inc., 116 N. 2nd St., Lewisburg, PA 17837. Registration fees are nonrefundable.

- Additional Fees

The following events require additional fees to the \$5 registration fee:

Bowling	\$9.00 for 3 games singles; \$9.00 for 3 games doubles
Golf	\$6.00 greens fee and \$4.00 cart fee

These fees must be paid at the respective sites. Do not send the additional fees with your registration.

- Medical Form

Every participant is required to have a completed medical form to compete. The medical information must accompany the entry, event selection, and release form, and payment. We urge you to check with your doctor before competing; however, a doctor's signature is optional on the medical form. This information remains confidential and will only be provided to emergency services personnel as necessary.

- Insurance

Each participant is responsible for his or her own medical insurance. It is expressly understood that the Union-Snyder County Senior Olympic Games, nor any participating facilities, do not insure against, and accept no responsibility for personal injury or property loss or damage, which might be sustained by the participant as a result of his or her participation.

See Schedule of Events on reverse side.

**2011
Union-Snyder County
Senior Olympics Games
Schedule of Events**

Sport/Event	Date/Time	Location
<ul style="list-style-type: none"> • Table Shuffleboard 	<p style="text-align: center;">Tues, Aug 30 9:00 am Doubles</p>	<p style="text-align: center;">Penns Creek Adult Resource Center 3551 Richard Road, Penns Creek</p>
<ul style="list-style-type: none"> • Bowling 	<p style="text-align: center;">Wed, Aug 31 9:00 am Singles 11:00 am Doubles</p>	<p style="text-align: center;">Best Bowl, 2208 Rt. 522, Selinsgrove</p>
<ul style="list-style-type: none"> • Golf 	<p style="text-align: center;">Thur, Sept. 1 9:00 am</p>	<p style="text-align: center;">Dick Kidd's Par 3 Golf Course 11th Ave., Shamokin Dam</p>

Healthy snacks and water will be provided. Lunch will NOT be provided however, participants may bring or buy their own lunch or snacks.

If you will be unable to participate in any event for which you have registered, please call Debbie Sanders as soon as possible at 524 - 2100 or 374 – 5558, ext. 126 and leave a message.

Senior Olympics Rules

- Bowling

Divisions: Female & Male Singles, Doubles (Either male, female or mixed)

Description: Doubles partners must bowl together. There will be three games for singles and three games for doubles.

NOTE: The age group for all doubles will be determined by the age of the youngest participant. Doubles participants with partners must give their requested partner's name and age on the event selection form, and both participants must have completed a registration form and paid the \$5 registration fee. If the participant does not have a partner, it should be indicated on the event selection form and the coordinator, if possible, will pair the participant with someone. **There is a \$9 fee for 3 games of singles, and \$9 for 3 games of doubles. Do not send this fee in with your registration, since it must be paid directly to the bowling lane on the day of the event.**

- Golf

Divisions: Individual Female & Male

Description: It is a 9-hole, par 3-golf tournament. The golf course is easy to walk; however, carts are available to rent. Practice rounds are not included. Participants may bring their own equipment; however, clubs are available to rent for an additional fee. The USGA rules of golf apply. In the case of a tie, scorecards will be matched, starting with Hole 1. Participants are encouraged to make their own groups of four or they can call Dick Kidd at 743-1425 to be placed in a group. Participants not assigned to a group before the day of the event will be placed in a group at the time of arrival.

NOTE: **There is a \$6 greens fee and a \$4 rental fee for golf carts. Do not send these fees with your registration packet since they must be paid directly to the golf course on the day of the event.**

- Table Shuffleboard

Divisions: Doubles (Either male, female or mixed)

Description: In table shuffleboard, participants push weights by hand and not with a cue. The participant whose weight is farthest from the playing end at the completion of a round are the winners of that round and receive points. The first participants to receive 11 points win the game. In case of a tie, the game will continue until one pair of participants gains a 2-point lead. The winners of the match are the participants who win 2 out of 3 games. Shuffleboard equipment is provided. Participants may be expected to help keep score.

NOTE: **The age division for doubles will be determined by the age of the younger participant. Doubles participants with partners must give their requested partner's name and age on the registration form, and both participants must have completed a registration form and paid the \$5 registration fee. If the participant does not have a partner, it should be indicated on the registration form and the coordinator, if possible, will pair the participant with a partner.**

Circle Shirt Size: Small Medium Large X- Large 2X 3X

Please see other side to select your events.

Event Selection Form

Place an "X" in the box next to the event(s) in which you wish to compete. Write the name and age of your partner or check the "need partner box" where applicable. EACH participant must complete an entry form, event selection form, medical form, release form, and submit the \$5 registration fee.

Table Shuffleboard: Doubles Only

Tues, August 30 – 9:00 AM

Partner _____ Partner's Age _____

Need Partner

Bowling: Wed, August 31

Singles- 9:00 AM

Doubles- 11:00 AM

Partner: _____ Partner's Age _____

Need Partner

Golf: Thurs, Sept. 1 – 9:00 AM

If you will be unable to participate in any event for which you have registered, please call Debbie Sanders as soon as possible at 524 - 2100 or 374 – 5558, ext. 126 and leave a message.

Medical Information Form

All participants MUST complete this form.

Please complete this form with your most recent medical information. THIS FORM MUST BE SUBMITTED WITH THE ENTRY FORM, EVENT SELECTION FORM, RELEASE FORM, AND RECEIVED BY THE UNION-SNYDER COUNTY SENIOR OLYMPIC GAMES BY AUGUST 19, 2011. NO ONE will be allowed to compete without the completed medical form. This information remains confidential and would ONLY be provided to emergency medical personnel. Please use BLACK INK and PRINT Clearly.

Name: _____ Age: _____

Address: _____ Gender: M ___ F ___

Phone: _____ E-mail: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Will Emergency Contact be at the Competition? Yes _____ No _____

Please circle the following:

Asthma	Yes	No	Hernia	Yes	No
Bladder/Bowel Problems	Yes	No	Indigestion	Yes	No
Chest Discomfort When Exercising	Yes	No	Joint Pain	Yes	No
Chest Pains	Yes	No	Leg Pain on Walking	Yes	No
Diabetes	Yes	No	Low Back Pain	Yes	No
Difficulty in Hearing	Yes	No	Lung Disease	Yes	No
Difficulty in Seeing	Yes	No	Osteoporosis	Yes	No
Drug Allergies (List below)	Yes	No	Passing Out Spells	Yes	No
Heart Condition	Yes	No	Shortness of Breath	Yes	No

List drug allergies: _____

Are you allergic to bee stings? Yes _____ No _____

Date of your most recent medical examination: _____

Doctor's name: _____ Phone: _____

Optional

I certify that the person above is capable of competing in the Union-Snyder County Senior Olympic Games.

Examiner's Signature: _____ Date: _____, 2011

 Please Sign Here

I attest that the above information is correct.

Participant's Signature: _____ Date: _____, 2011

Please sign Release Form on other side.



This is a release

Amateur Athletic Waiver and Release of Liability

In consideration of being allowed to participate in any way in the Union-Snyder County Senior Olympic Games athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS THE UNION-SNYDER COUNTY SENIOR OLYMPIC GAMES**, their organizers, officers, officials, agents and/or employees, other participants, **SPONSORING** agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY** loss or damage to person or property, **WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE**.
5. I, the undersigned, declare on my honor that I am an amateur and agree to follow the rules of the Union-Snyder County Senior Olympic Games, obey my coach (es)/team leader(s), tournament officials, and directors. I am in good physical condition and have no disease or injury that would impair my doing my best in competition.
6. I hereby authorize any first aid, medication, medical treatment, or surgery deemed necessary in case of an emergency. I also authorize the attending medical personnel to execute on my behalf any permission forms and other appropriate medical documents and act on my behalf if I am not immediately available to do so.
7. I hereby consent to allow my picture or likeness to appear in any official document, sponsor advertisement, and /or exclusive radio or television coverage of the Union-Snyder County Senior Olympic Games in any manner incidental to my participation in the Union-Snyder County Senior Olympic Games without compensation to me.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.



Participant's signature: _____ Date: _____, 2011

Please complete and sign the Medical Information Form on reverse side.



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Union-Snyder County
Senior Olympic Games



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**Union-Snyder County
Senior Olympic Games
116 N. 2nd St.
Lewisburg, PA 17837**

This packet contains...

- General Information
about the Games**
- Schedule of Events**
- Rules of the Games**
- Entry Form**
- Event Selection Form**
- Medical Info Form**
- Release Form**

Union-Snyder County Senior Olympic Games



August 29 - September 1, 2011