

COBB COUNTY KIA

CHEROKEE COUNTY SENIOR OLYMPICS

2011 REGISTRATION FORM



Name _____ Age (as of 4/30/11) _____

Address _____

City _____ State _____ Zip Code _____

Home _____ Cell _____ Work _____

Email _____

Emergency Contact Name _____ Phone _____

T-shirt Size (circle): S M L XL XXL XXXL

Circle: Female Male Wheelchair

Circle one: I WILL or WILL NOT attend Opening Ceremony (Sat., April 2, 9:00 am at Woodstock City Park)

Circle one: I WILL or WILL NOT attend Closing Ceremony (Fri., April 29, 10:00 am at Lodge at Bridgemill)

LIABILITY WAIVER (Must sign to participate)

I agree to hold harmless and defend the Cherokee County Senior Olympics (CCSO) and all event sponsors, venues, and other parties affiliated with the CCSO against any and all claims for damages, compensation, or otherwise, growing out of or resulting from injury while participating in this program, and to reimburse or make good any loss or damages or costs that CCSO or events sponsors, venues, and other parties affiliated with the CCSO may have to pay if litigation arises from injury. I hereby waive any and all rights of exemption, both as real or personal property, to which I may be entitled under the laws of this or any other state as against claims for reimbursement or indemnification by CCSO, and all events sponsors, venues, and other parties affiliated with the CCSO.

I have prepared myself for all the events that I have entered by practicing prior to the CCSO. I warrant and represent that I am in good physical health condition, and that I am physically able to compete in the events. To the best of my knowledge and belief, I have no physical restrictions that would prohibit my participation in these events. I also understand it is in my best interest that I consult my physician prior to these events. If I am taking medication(s) that would affect my performance, or could result in an unsafe or unhealthy medical condition because of my participation in any event, I will so notify CCSO of such critical information. CCSO has permission to have a physician attend to me if necessary during participation in this event. Further, I hereby grant full permission to CCSO to use my photograph(s) in any medium for any legitimate promotional purposes. I waive the right to inspect or for any compensation.

SIGNATURE _____ DATE _____

Please check the events you wish to enter on the reverse side prior to mailing. Included check with completed registration form.

Event Selection Form

Please complete one form per person. Check each event you wish to enter. A \$12.00 registration fee must accompany each registration form. (Please add \$30.00 for golf participants.) Registration includes participation in all events, CCSO T-shirt and participant bag (available at Opening Ceremony). Gold, Silver and Bronze medals will be awarded to winners. *Must have partner or team to compete if indicated.
 & Suggests the event is wheelchair friendly.

EVENT	DATE	TIME	LOCATION
1 Mile Walk	April 2	8:00 am	Woodstock City Park
Opening Ceremony &	April 2	9:00 am	Woodstock City Park
Washers &	April 6	10:00 am	Habersham Bank, Canton
Hillbilly Golf &	April 6	10:00 am	Habersham Bank, Canton
*Golf Tournament (2 man team Callaway Scoring)	April 7	9:00 am	Callahan's Golf Course
Partners Name:			
Pickle Ball	April 8	10:00 am	Cherokee Tennis Center
*Softball Tournament	April 9	9:00 am	Dupree Park
Team Name:			
Will Bowling &	April 11	2:00 pm	William G Long Senior Center
Billiards	April 12 & 14	8:00 am	William G Long Senior Center
Bocce Ball	April 15	10:00 am	Soleil Laurel Canyon
Horseshoes	April 19	10:00 am	Habersham Bank, Canton
Mah Jongg &	April 20	9:30 am	Soleil Laurel Canyon
Swimming Events	April 21	10:00 am	Gold's Gym
50M Free Stroke			
50M Back Stroke			
50M Breast Stroke			
50M Butterfly Stroke			
100M Free Stroke			
100M Back Stroke			
100M Breast Stroke			
100M Individual Medley			
Baggo &	April 25	10:00 am	CRPA Recreation Center
Basketball Free Throw &	April 25	10:00 am	CRPA Recreation Center
Bowling &	April 27	1:00 pm	Cherokee Bowling Lanes
Closing Ceremony &	April 29	10:00 am	The Lodge at Bridgemill

Registration fee \$12.00 _____
 Golf Fee \$30.00 _____
 Total amount Paid _____

Mail to: CCSO, PO Box 672, Lebanon GA 30146.
 For information call Allison Chandler at 678-207-7884 or Betty Rice at 678-445-6518 or visit us at www.ccsrolympics.org.