

2019 Rhode Island Senior Olympics Registration Form

Please **PRINT** your Name, Address, City, State, Zip and E-Mail **legibly** so that we may enter your information accurately into our registration system. Complete both sides of this form and mail to:

Rhode Island Senior Olympics, PO Box 16193, Rumford, RI 02916

Name: _____

Address: _____

City: _____ ST: _____ Zip: _____

Home Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

E-Mail Address: (**Important!**) _____

Age: (as of 12/31/19) _____ (We use this information to place athletes with their peers. Medals are awarded by peer age groups).

Date of Birth: ____/____/____ T-Shirt Size: M _____ L _____
MM DD YYYY

XL _____ 2 XL _____

Registration Fees

(See reverse for fee schedule)

Number of Sports Selected: _____

Total Sports: \$ _____

Contribution: \$ _____

Grand Total: \$ _____

Please make checks payable to:
Ocean State Senior Olympics

Waiver of Liability (Please read before signing)

Rhode Island Senior Olympics highly recommends that participants consult their physicians with regard to practice, preparation, and competition in the Rhode Island Senior Olympics program.

I, the undersigned, hereby agree to indemnify, save, and hold harmless the Rhode Island Senior Olympics, all contributing companies and agencies, or any of their agents or representatives for my health, safety, or any injury resulting from my participation in the Ocean State Senior Olympics.

I have prepared myself for the events that I have entered by practicing prior to the Rhode Island Senior Olympics. To the best of my knowledge and belief, I have no physical restrictions that would prohibit my participation in the events I have selected. I consent to have my picture or likeness used in any media representation of the Rhode Island Senior Olympics incidental to my participation.

Signature: _____

Date: ____/____/2019



RHODE
ISLAND
COLLEGE



BROWN



2019 Rhode Island Senior Olympics Sports, Events & Fees

NAME: _____

Softball

City Park, Warwick, RI

August 14–18

- Softball (Team Captain must submit team roster)

Team Name: _____

Golf \$65

Triggs Memorial Golf Course, Providence, RI

Wednesday, October 9

Fee includes golf & dinner

- Handicap _____

- 18 Holes Handicap _____

Pickleball \$35

Lincoln Parks and Recreation

Saturday & Sunday, September 21 & 22

@ 9:00 AM

- Singles

- Doubles Partner : _____ Age: _____

- Mixed Partner : _____ Age: _____

Basketball \$125 per Team

Rhode Island College Recreation Center

600 Mt Pleasant Ave, Providence, RI

Sunday, October 27 @ 10:00 AM

- Free Throw (\$25 for those not competing on a team)

- 3 on 3 Competition

(Team Captain must submit team roster)

Team Name: _____

Track and Field \$35

Brown University

Sunday, September 22 @ 9:00 AM

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> 50 M | <input type="checkbox"/> Discus |
| <input type="checkbox"/> 100 M | <input type="checkbox"/> Hammer Throw |
| <input type="checkbox"/> 200 M | <input type="checkbox"/> Javelin |
| <input type="checkbox"/> 400 M | <input type="checkbox"/> Shotput |
| <input type="checkbox"/> 800 M | <input type="checkbox"/> Long Jump |
| <input type="checkbox"/> 1500 M Run | <input type="checkbox"/> Triple Jump |
| <input type="checkbox"/> 1500 M Racewalk | <input type="checkbox"/> High Jump |
| <input type="checkbox"/> 1500 M Power walk | (You may select up to 6 events) |

Swimming \$35

Rhode Island College Recreation Center

600 Mt Pleasant Ave, Providence, RI

Sunday, October 27 @ 12:00 PM

- | | |
|--|---|
| <input type="checkbox"/> 50 yd Backstroke | <input type="checkbox"/> 200 yd Butterfly |
| <input type="checkbox"/> 100 yd Backstroke | <input type="checkbox"/> 50 yd Freestyle |
| <input type="checkbox"/> 200 yd Backstroke | <input type="checkbox"/> 100 yd Freestyle |
| <input type="checkbox"/> 50 yd Breaststroke | <input type="checkbox"/> 200 yd Freestyle |
| <input type="checkbox"/> 100 yd Breaststroke | <input type="checkbox"/> 500 yd Freestyle |
| <input type="checkbox"/> 200 yd Breaststroke | <input type="checkbox"/> 100 yd IM |
| <input type="checkbox"/> 50 yd Butterfly | <input type="checkbox"/> 200 yd IM |
| <input type="checkbox"/> 100 yd Butterfly | (You may select up to 6 events) |

Table Tennis \$25

U.S. Post Office, Manville, RI

Sunday, September 29 @ 10:30 AM

- Singles

- Doubles Partner : _____ Age: _____

- Mixed Partner : _____ Age: _____

Bowling (Ten Pin)

Site and Date TBD