

24th Annual BC SENIORS GAMES

**ZONE 3 - GOLF
QUALIFYING PLAYDOWN**

HOPE GOLF CLUB

FRIDAY, MAY 13th, 2011

Assigned Tee Times starting at 10am

MUST REGISTER BEFORE May 9th

Membership Fee \$15 plus Green fees \$30 - Total \$45
Cheques payable to BC Seniors Games Society Zone 3

All applicants must complete Membership Application and sign the Waiver Form

Power Carts optional - \$15 (shared) - pay on day of play directly to Pro Shop

SEND CHEQUE AND APPLICATION TO:

Zone 3 Golf Coordinator

Valerie Edmondson, Box 315, Agassiz, BC V0M 1A0

email: vedmondson@shaw.ca

Event A - Men 0 to 20.0 index; Event B - 20.1 to 40+ index
Event A - Women 0 to 24.3 index; Event B - 24.4 to 40+ index

Age categories:

55-59, 60-64, 65-69, 70-74, 75-79, 80+

One low gross and one low net winner

in each event from each category will qualify for the Final Games

24th Annual BC SENIORS GAMES

August 16 to 20, 2011 West Kootenays, BC

Open to permanent residents of BC. All men and women who will be 55 or older by December 31st, 2011

2-day GOLF EVENT - Thursday August 18 and Friday August 19, 2011

one day at Castlegar Golf Club and one day at Trail Birchbank Golf Course (to be assigned)

Further information: www.bcseniorgames.org

**Application for Membership in the BC SENIORS GAMES SOCIETY
Zone # 3 - GOLF - 2011**

Preferred First Name* _____ Last Name* _____

Preferred Phone#() _____ Optional Phone#() _____

Mailing Address _____

City _____ Postal Code _____

e-mail Address _____

Gender: M__ F__ *Birthdate: MM____ DD____ YYYY____ **Age group:** _____

Current Index Factor*: _____ **Power Cart Needed?:** _____

Men: **Event:** A__ (0-20.0) or B__ (20.1-40)

Women: **Event:** A__ (0-24.3) or B__ (24.4-40)

Please fill in the following regarding the **final BC Seniors Games (Aug 16-20/11)**

*I have competed previously at the Games: Y__ N__

*I will need transportation while at the games: Y__ N__

*I am a first time participant - t-shirt Size S__ M__ L__ XL__ XXL__

*I will be attending the Games as: Participant__ Non-Participant__ Member__

***MEDICAL INFORMATION:** Emergency Contact Name: _____

Relationship: _____ Phone #(where they can be reached) (____) _____

Below, list any existing medical conditions that you will want those assisting you in a medical emergency to know about. i.e. medications and dosages, drug reactions, allergies, pre-existing conditions, high blood pressure, heart condition, pacemaker, joint replacement.

If you have been diagnosed with a potentially serious condition have you received permission from your doctor to compete? YES__ NO__

For Co-ordinators or Registrars use only: BCSG Card issued: _____
Online Registration entered _____ Online Registration checked _____

Membership Fee (\$15.00) _____

FINALS:

Participant Fee (\$50.00) paid _____

PLAYDOWN:

Golf Surcharge (\$30.00) paid _____

Green Fee (\$30.00) _____

TOTAL RECEIVED _____

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Non-Participant (\$35.00) paid _____

Substitute Fee (\$15.00) paid _____

* Please note that membership in the BC Seniors Games Society requires a yearly membership fee of \$15.00 along with the signed copy of the waiver below in order to participate in the BC Seniors Games. This also entitles the member to participate in any Zone Play-off that may be needed. There will be further fees for those who go on to the games.

A Membership Application/Waiver Form must be signed by all members as a requirement of our Risk Management and as a condition of entry in Zone tryouts, Zone playoffs, and the BC Seniors Games themselves. The waiver forms will be kept within the Zone as part of the membership records for that Zone.

WAIVER FORM

Participant Hold Harmless Clause

Participant information is collected under the authority of the BC Seniors Games Society as collector and custodian of this information. The information provided will be used to determine the eligibility to participate in the annual BC Seniors Games. On confirmation of eligibility the information will be used to arrange liability insurance coverage with respect to voluntary participation of registered participants in the annual BC Seniors Games. The name, hometown and sport of registered participants will be provided to media outlets and available on the BC Games Society and/or annual Host Society websites. The name, address and image of registered participants may be used in non-commercial promotion/development of sport by the BC Seniors Games Society. The names, addresses and image may be provided to the Premier and the Minister responsible for Community, Sport, and Cultural Development.

As a condition of entry into the BC Seniors Games, it must be understood that the participants enter entirely at their own risk and will not hold the BC Seniors Games Society, the annual Host Society, the BC Games Society, and the Province of British Columbia, their staff, agents, and volunteer workers responsible for injury, loss or damage occurring during the annual BC Seniors Games. Participants agree to release, discharge and undertake not to commence any action against the annual Host Society, BC Seniors Games Society, the BC Games Society, and the Province of British Columbia from any and all claims and causes of action, or liability of any kind whatsoever for injuries, property damage, or death, which in any way results from participating in the annual BC Seniors Games. The annual Host Society, the BC Seniors Games Society, the BC Games Society, and the Province of British Columbia do not assume responsibility for loss of wages, medical, dental, or hospital care for athletes, officials, or volunteers during the annual BC Seniors Games.

I have read, understood, and agree to all of the above.

Signed: _____ Date: _____
(Signature required here)
