

Kerr-Tar Regional Senior Games Registration Form

Please PRINT clearly.

PARTICIPANT INFORMATION

Name: _____
(First) (MI) (Last)

Date of Birth: ____/____/____ Age as of 12/31/25: _____

Address: _____ NC, _____
(Street) (City) (Zip)

Phone: (____) ____-____ Sex: ___ M ___ F Shirt Size: _____

Email: _____

EMERGENCY CONTACT & HEALTH INFORMATION

Physician's Name: _____ Phone: (____) ____-____

Emergency Contact #1: _____

Relationship: _____ Phone: (____) ____-____

Emergency Contact #2: _____

Relationship: _____ Phone: (____) ____-____

Ethnicity:	Names of Medication:
___ African American	_____
___ Asian	_____
___ Indigenous Person	_____
___ Hispanic	Your Medical Conditions:
___ White	_____
___ Other	_____
___ Unknown/Declined	_____

___ I give permission for my image and/or likeness to be used in the promotion of advertising current and future events associated with Kerr-Tar Regional Senior Games.

Assistive Devices You Use (hearing aids, glasses, walker, etc.)

Your Allergies:

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SPORTS EVENTS

Please indicate the events in which you would like to participate. Refer to events schedule for date, time, and event sites. Early Bird Deadline: **February 24, 2025**. Regular Deadline: **March 7, 2025**. All events are offered at State Finals.

Individual Sports

- ___ Basketball Shooting
- ___ Billiards
- ___ Bocce
- ___ Cornhole
- ___ Croquet
- ___ Disc Golf
- ___ Football Throw
- ___ Fun Walk
- ___ Golf
- ___ Mini Golf
- ___ Horseshoes
- ___ Shuffleboard
- ___ Softball Throw
- ___ Team Basketball (TBA)
- ___ 5K Cycling
- ___ 10K Cycling
- ___ 1 Mile Cycling
- ___ 1 Mile Recumbent Bike
- ___ 5K Recumbent Bike
- ___ 10K Recumbent Bike

Table Tennis

- ___ Singles
- ___ Doubles (Partner/Age)
- _____ / _____
- ___ Mixed Doubles
- _____ / _____

Track & Field Events

- ___ 50 M Dash
- ___ 100 M Dash
- ___ 200 M Dash
- ___ 400 M Dash
- ___ 800 M Dash
- ___ 1500 M Dash
- ___ 1500 M Power Walk
- ___ 5K Power Walk
- ___ Discus
- ___ Running Long Jump
- ___ Standing Long Jump
- ___ Shot Put
- ___ 5K Road Race
- ___ 10K Road Race

Pickleball

- ___ Singles
- ___ Doubles (Partner/Age)
- _____ / _____
- ___ Mixed Doubles
- _____ / _____

Badminton

- ___ Singles
- ___ Doubles: (Partner/Age)
- _____ / _____
- ___ Mixed Doubles:
- _____ / _____

Bowling

- ___ Singles
- ___ Doubles: (Partner/Age)
- _____ / _____
- ___ Mixed Doubles:
- _____ / _____

Tennis

- ___ Singles
- ___ Doubles: (Partner/Age)
- _____ / _____
- ___ Mixed Doubles:
- _____ / _____

Swimming

- ___ 50 Yd Back Stroke
- ___ 50 Yd Breast Stroke
- ___ 50 Yd Butterfly
- ___ 50 Yd Free

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SILVERARTS

Please indicate the events in which you would like to participate. A maximum number of two pieces per sub-category will be allowed. **Entries from previous years are not eligible and will not be accepted. Registration Deadline: March 7, 2025.**

Heritage Arts

- Basket Weaving
- Crocheting
- Jewelry
- Knitting
- Needlework
- Pottery (thrown)
- Pottery (hand built)
- Quilting (by hand)
- Quilting (machine)
- Stained Glass
- Tole Painting
- Weaving
- Woodcarving
- Wood Turning
- Woodworking
- Other

Title of Heritage Arts

Pieces

1. _____
2. _____



Visual Arts

- Acrylics
- Drawing
- Oil
- Photography (film)
- Photography (digital)
- Watercolor
- Pastels
- Sculpture
- Mixed Media 2D
- Mixed Media 3D

Title of Visual Arts Pieces

1. _____
2. _____

Literary Arts

- Essay (non autobiographical)
- Poem
- Life Experience
- Short Story

Title of Literary Piece

1. _____
2. _____



Performing Arts

Choose one of the categories below and answer the following related questions:

- Cheerleading
- Comedy/Drama
- Dance
- Line Dance
- Instrumental
- Vocal

Name of Group/Act

Name of Accompanist

Number of People in Group

Title of Piece

REMINDER: ALL SUBMITTED PIECES MUST BE TITLED.



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FEE WORKSHEET

EARLY BIRD REGISTRATION (by Feb. 24, 2025).....\$15.00 = \$ _____

ENTRY FEE (by Mar. 7, 2025).....\$20.00 = \$ _____

*Required for **all** participants & includes t-shirt, invitation to Opening Ceremonies, SilverArts Showcase, & Awards event*

EVENT FEES

(Required **in addition to** the Entry Fee)

- Bowling.....\$5.00 each = \$ _____
- Golf.....\$36.00 = \$ _____
- Mini Golf.....\$3.00 = \$ _____

***Bowling price is for each event (i.e. singles + doubles = \$10.00)**

Make checks payable to: **Your local Senior Center**

Date: _____ Cash or Check # _____ **TOTAL AMOUNT: \$ _____**

LIABILITY WAIVER

In consideration of being allowed to participate in any way in the 2025 Kerr-Tar Regional Senior Games Athletic/Sports programs, and 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 the 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 I may be removed for negative sports conduct; and
4. I am in the necessary physical condition to participate in the registered activity(ies). I authorize the staff to seek emergency medical care on my behalf if needed. I will assume all costs associated with any such treatment; and
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Kerr-Tar Regional Senior Games, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, volunteers, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE to the fullest extent permitted by law.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER & RELEASE, UNDERSTANDS THAT S/HE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING BELOW, & SIGNS IT VOLUNTARILY.

Signature

Date