

INDIVIDUAL ENTRY FORM: PART 3 of 3

RELEASE OF LIABILITY - READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Polk Senior Games program (and the National Senior Games Association) and its related events and activities, I, the undersigned, ACKNOWLEDGE, APPRECIATE AND AGREE 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 skills, 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 Polk Senior Games or their representative immediately; and

(4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the Polk Senior Games, their officers, volunteers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I FURTHER AGREE THAT:

(5) I CONSENT TO ALL EMERGENCY MEDICAL TREATMENT as may be deemed appropriate under existing circumstances by medical personnel or personnel associated with Polk Senior Games.

(6) I will ALLOW my PHOTOGRAPH, PICTURE or LIKENESS and/or VOICE to APPEAR in any official documentary, promotional (including any and all advertising), television, radio, or film coverage of the Games, WITHOUT COMPENSATION.

(7) I HAVE READ THE POLK SENIOR GAMES CODE OF CONDUCT (page 8 of the Registration and Rule Book) and UNDERSTAND THAT I MAY BE REMOVED AS A PARTICIPANT IF I VIOLATE THE RULES OF THE CODE OF CONDUCT.

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 Name Printed _____

Participant's Signature _____ Date _____

INDIVIDUAL ENTRY FORM: PART 1 of 3

Read NEW Entry Instructions Below - ALL requested information MUST be completed to process

Have you entered Polk Senior Games in previous years? Yes No

First _____ MI _____ Last _____

Address _____

City _____ State _____ Zip _____

Phone _____ - _____ - _____ Email _____

Birth Date (m/d/y) ____ / ____ / ____ Age you **WILL BE** on **Dec 31, 2026** _____

Gender: Male Female T-Shirt (unisex): M L XL XXL XXXL

Emergency Contact (required)

Name _____ Phone _____ - _____ - _____

Do you live in a "senior community"? Which one? _____

INDIVIDUAL REGISTRATION INSTRUCTIONS

OPTION 1) NEW ONLINE REGISTRATION

Visit www.polkseniorgames.org - Follow step by step instructions

DEADLINE: Online entry must be submitted by 11:59 PM ET, Friday, Feb 6

OPTION 2) PAPER REGISTRATION

Individual Entry Form (2 pages) and Softball Team Entry Form (larger size) may also be printed from website, www.polkseniorgames.org, under the Enter the Games tab.

- **Remove Individual Entry Form from book - entire center page.** Copies are OK, but front and back must be copied and submitted.
- **PART 1 of 3 (above):** Complete all requested personal information.
- **PART 2 of 3:** Check events to enter. Refer to schedule to avoid conflicts.
 - **Partner Events:** You must include your partner's name, date of birth, and email address. Entry cannot be processed without this information.
 - If both partners are registering by paper, send entry forms together, if possible.
 - **Bowling Mixed Team:** Register yourself and pay your own bowling team event fee. You must indicate team name, age group, and team manager name.
 - **Indicate fees** in Fee Box according to the fee schedule. Total all fees.
 - Include check, cash, money order payable to POLK SENIOR GAMES.
- **PART 3 of 3:** The Release of Liability must be read and signed in agreement for entry to be processed.
- **MAIL OR DELIVER ENTRY TO:** POLK SENIOR GAMES, 515 EAST BOULEVARD ST, BARTOW FL 33830
- **DEADLINE:** Paper entries must be received at the Polk Senior Games office in Bartow by 5:00 PM on Friday, February 6, 2026. Use overnight service if needed.

If you have questions, need to make changes, or have not received your confirmation email within a week, call 863-533-0055.