

Delaware Senior Olympics 2012 Membership Application

For the Period of January 1, 2012 – January 31, 2013

PLEASE PRINT THE FOLLOWING INFORMATION, SIGN THE WAIVER AND MAIL THIS FORM WITH YOUR \$20.00 MEMBERSHIP FEE TO
Delaware Senior Olympics, 1121 Forrest Avenue, Dover, DE 19904
THIS FORM IS REQUIRED TO PARTICIPATE IN THE DELAWARE SENIOR OLYMPICS ANNUAL GAMES

Name: Last: _____ First: _____ MI: ____ Suffix: _____

DSO ID#: _____ Gender: ____ Date of Birth: _____ Email: _____

Street Address: _____

City, State, Zip: _____

Phones: Home: _____ Work: _____ Cell: _____

WAIVER and RELEASE of LIABILITY

By becoming a member of Delaware Senior Olympics (hereafter "DSO") and participating in any DSO activities, I agree to abide by all rules and regulations established by DSO and I recognize that by participating in these activities, there is risk of injury.

By registering or participating, the registrant/participant understands that individual health, accident, and/or liability insurance is not provided for Delaware Senior Olympics events and agrees to adhere to program rules.

I do hereby, for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages that I may have or that may hereafter accrue to me arising out of or in any way connected with my participation in Delaware Senior Olympics programs/competitions. Photos taken during programs and competition may be used for educational or marketing purposes by Delaware Senior Olympics.

By signing below, I understand and agree to the "waiver and release of liability" .

Signature: _____ Date: _____