

**OPEN TO ALL STATEN ISLANDERS AGES 50+**

**Beatrice Victor Senior Olympics-2019**

Copies of application can be downloaded at [www.beatricevictorseniorolympics.com](http://www.beatricevictorseniorolympics.com)

Registration	Reg Check	Computer Entry

**Please Print Clearly**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ SI NY Zip 103 \_\_\_\_\_ Phone # \_\_\_\_\_

E-Mail \_\_\_\_\_ **Circle** Male Female Age as of Sept 2019 \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Telephone \_\_\_\_\_

<b>Circle</b> Age Group:	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90+
<b>Circle</b> Tee Shirt Size:	Medium	Large	X Large	XX Large	XXX Large				

**PLEASE CIRCLE YOUR EVENT CHOICES**

**Sunday - September 22**

TABLE TENNIS (9:00 am) SWIMMING (9:00 am) PREDICT A PACE (12:45 pm)  
 BALLROOM DANCE (2:00 pm-partner required\*)

**Monday - September 23**

BOCCIE (8:00 am-limit 64) HORSESHOES (11:30 am)  
 SCRABBLE (12:00 pm-limit 32) SHUFFLEBOARD (1:30 pm)

**Tuesday - September 24**

BADMINTON (9:00 am-limit 32) CHECKERS (10:00 am) CHESS (11:00 am)  
 CORNHOLE (11:30 pm) PICKLEBALL (12:00 pm) BASKETBALL SHOOT (1:00 pm)

**Wednesday - September 25**

DARTS (10:00 am) PINOCHLE (10:00 am-partner required\*-limit 32)  
 BRIDGE (11:00 am-limit 16) CROQUET (11:00 am-limit 36)  
 8 BALL POOL (11:30 am) MAH JONGG (1:00 pm)

**Thursday - September 26**

GOLF (7:00 am-\$40 extra) BOWLING (8:30 am-\$5 extra) MINIATURE GOLF (11:00 am)  
 CANASTA (1:00 pm) BACKGAMMON (1:00 pm-limit 32)

**Friday - September 27 CLOSING CEREMONIES - 9:30am JCC, 1466 Manor Rd**

**\*A COMPLETED SIGNED APPLICATION AND REGISTRATION FEE IS REQUIRED FOR ALL PARTICIPANTS.**

**Registration Deadline:** Signed forms, a check/money order for \$15.00 per person (additional fees for Golf-\$40, and Bowling-\$5) payable to the Beatrice Victor Senior Olympics of Staten Island must be received **no later than September 1** (late registration fee add \$5.00). Golf & Bocce applications will **NOT be accepted after August 23**. Detailed information for all events will be mailed to you. (No refunds-nontransferrable.)

Questions on Events call Liza Horner at the YMCA at 718-981-4933 x1412; Registration call Janice Salerno at the JCC at 718-517-7447.

<p><b>Swimming</b> - You must list events</p> <p>1 _____</p> <p>2 _____</p> <p align="center"><i>Swim Caps Are Required</i></p> <hr/> <p align="center"><b>Predict-A-Pace 2 Miles</b></p> <p align="center"><i>You must predict your time to run/walk 2 miles</i></p> <p align="center">_____ Minutes _____ Seconds</p>
<p><b>Ballroom Dance</b></p> <p>Select Dances (up to 5 dances)</p> <p>___ Cha-cha ___ Waltz ___ Tango</p> <p>___ West Coast Swing ___ Samba</p> <p>Partner Name _____</p> <hr/> <p align="center"><b>Pinochle</b></p> <p>Partner Name _____</p> <hr/> <p align="center"><b>Canasta</b></p> <p>Partner Name _____</p>
<p><b>Golf</b></p> <p>Limited to 144 players</p> <p>List USGA Handicap Index _____ max 40</p> <p>Avg. Score at LaTourette _____</p>

<p>Mail this form and check to: <b>Beatrice Victor Senior Olympics</b>  <b>Jewish Community Center</b>  <b>1466 Manor Road, S.I. , NY 10314</b></p>	<p><b>Entry Fee \$ 15.00 (per person)</b></p> <p><b>Bowling \$ 5.00 (additional)</b></p> <p><b>Golf \$ 40.00 (additional)</b></p>
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**Liability Waiver (MUST be signed and mailed with your completed application.)** I hereby certify that I am physically fit, have sufficiently trained for competition in these events, and that my physical condition has been verified by a licensed medical doctor. I hereby consent to allow my picture or likeness to appear in any official documentary, sponsor advertisement, or exclusive television coverage of the Beatrice Victor Senior Olympics, in any manner incidental to my participation in the Beatrice Victor Senior Olympics, and without compensation to me. I agree to assume all responsibility for all risk, damage or injury that may occur to me as a participant in these events. I hereby, for myself, my heirs, executors and administrators, release and discharge the JCC, the YMCA, the S.I. Advance, the City of New York, its employees, agents, agencies and sponsors and all persons associated with the Beatrice Victor Senior Olympics from all claims, damages and rights of action present or future which may arise in connection with my participation.

Signature \_\_\_\_\_ Name (please print) \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_