

2021 Connecticut Masters' Games Racquetball Tournament

When & Where:

- ◆ Saturday, November 20th
- ◆ North Haven Health & Racquet Club:
100 Elm St, North Haven, CT 06437

Entry Fee/Events Offered:

- ◆ \$40 for first event/\$10 for each additional event
- ◆ Offering: Men's and Women's Singles
- ◆ Men's and Women's Doubles
- ◆ Mixed Doubles

Age Group Divisions:

- ◆ 30-39, 40-49 (non-qualifying)
- ◆ 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80+ (qualifying)
- Qualifier for the 2022 National Senior Games in Ft. Lauderdale, FL

What you get:

- ◆ Each Athlete Receives a Master's Game T-shirt.
- ◆ Top 3 finishers in each division receive a medal.
- ◆ Top 4 finishers in each division qualify for the 2022 National Senior Games in Fort Lauderdale, FL
- ◆ If out-of-state residents qualify at an "Open State" qualifying games, they will not take away a qualifying spot from a state resident. "Open" games may qualify the number of state residents specified for each event in addition to the out-of-state qualifiers.
- ◆ All Doubles teams made up of one in-state and one out-of-state athlete will be designated as an out-of-state team.

Registration:

- ◆ Registration deadline: Monday, November 12th
- ◆ The tournament is a pre-registration event only! No onsite registration!
- ◆ Register at: <https://registration.ctmastersgames.org/registrationStep0.asp?action=&sportID=9&axy=pt10>

For questions or more details visit:
<https://ctmastersgames.org/individual-sports/racquetball/>
Call: (860) 788-7041
Email: CTMastersGames@ctmastersgames.org

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**CONNECTICUT
MASTERS'
GAMES**

Celebrating Master And Senior Athletes.

Presented By



**National
Senior Games
Association**

PROUD MEMBER

2021 CONNECTICUT MASTERS' GAMES – RACQUETBALL REGISTRATION FORM

975 Middle Street, Unit G, Middletown, CT 06457 TEL: (860) 788 7041 Email: CTMasters@CTMastersGames.org



First Name: _____ M.I.: _____ Last Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone/Cell: _____ Email: _____

Male Female Date of Birth: _____ Age on 12/31 _____ T-Shirt Size: *S, M, L, XL, XXL, 3X, Other:* _____

Buddy program discount: Athlete ID or Name Required _____

Previous National Senior Games Athlete : Yes No If Yes: NSGA # _____ or Don't Know

HOW DID YOU HEAR ABOUT THE CT MASTERS' GAMES? (Circle Best) Email Newspaper Postcard Previous Participant Radio Web

SELECT YOUR EVENTS: SINGLES DOUBLES MIXED DOUBLES

LIST YOUR DOUBLES/MIXED DOUBLES PARTNER: (If you do not have a partner, list "Need a Partner")

Doubles Partner Name: _____ Partner's Age on 12/31: _____

Mixed Doubles Partner Name: _____ Partner's Age on 12/31: _____

Registration MUST be postmarked by **Friday, November 12th**. Pricing: 1 Event: \$40 | 2 Events: \$50 | 3rd Event: \$60

PAYMENT OPTIONS: Checks & Mailing Address: Payable to: CSMG, 975 Middle Street, Unit G, Middletown, CT 06457 or

Credit Cards: Call our office 860-788-7041 or Pay online: NutmegStateGames.org/payment – Note Payment Reason: Racquetball

Release of Liability Waiver, Pledge and Consent Form

In consideration of being allowed to participate in any way with the Connecticut Sports Management Group, Inc., (hereby referred to as: CSMG), its related events and activities i.e.: Nutmeg State Games, CT Masters Games, Football Showcase, Weight Lifting Competition etc.

I, (Print Name) _____ 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 this 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 CSMG 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 CSMG, Inc, their officers, officials, agents and/or employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessor's of premises used or the activity ("Releasees") WITH REPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEEESEES OR OTHERWISE, to the fullest extent permitted by law; and,
5. I declare that to the best of my knowledge, I am in good physical condition and have no disease or injury that would be aggravated by my participation in activities related to the CSMG, Inc. (Nutmeg State Games, CT Masters Games etc.), its related events and activities; and,
6. I, also, declare on my honor that I am an amateur and fulfill the conditions stipulated by the CSMG, Inc. (Nutmeg State Games, CT Masters Games etc.), and all of its related events and activities. I will compete in the Games, keep myself in top physical condition and retain my amateur status; and,
7. I hereby consent to allow my picture or likeness to appear on web and social media pages as well as promotional materials related to the "Games". I hereby also consent to allow my picture or likeness to appear in any official documentary, sponsor advertisement or exclusive television coverage of the Nutmeg State Games in any manner incidental to my participation in the Nutmeg State Games and without compensation to me; and,
8. I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from: an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof; and,
9. I agree to touch-free temperature checks upon arrival at any facility. I consent to wearing a mask (face covering) as required per facility or State mandate; and,
10. I declare that I have personal medical coverage and that I have read the release and waiver and by signing it agree to all of its items.

In consideration of having the opportunity to participate as either a team member or competitor at location, and in acknowledging that I am aware of and willing to assume the risks associated with this activity, I hereby voluntarily agree to waive, hold harmless and indemnify Connecticut Sports Management Group and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever arising out of ordinary negligence which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. I indicate my agreement to this hold harmless elective noted below.

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.

PARTICIPANTS SIGNATURE _____ **AGE:** _____ **DATE:** _____