

50 PLUS STATEWIDE SENIORS DOMINO GAMES, INC.



**FLORIDA 50+ SENIOR GAMES
RANDOM**

DOMINO CHAMPIONSHIP

Sunday, December 5, 2021

Registration at 12:00 Noon | Lunch: 12:30 p.m.

LOCATION

*City of Plantation, Jim Ward Community Center
301 NW 46th Ave., Plantation, FL. 33317*

\$20 Registration Fee • Register by November 15, 2021

Space is
Limited &
COVID save
Protocols must
be Followed!

For details, call Dennis Hinds 954-266-9876

Web: <http://50plusdomino.com>

SPONSORS



Hazelle Rogers
Mayor



"Host City"



Plantation

Committed to Excellence... Always

50 PLUS STATEWIDE SENIORS DOMINO GAMES - APPLICATION

TOURNAMENT GUIDELINES

"Fair Play" Rules will be provided and elaborated on with regards to the "Whys," "Wherefores," and the "Therefores."

Appointed tournament judges will officiate and will be the first line for conflict resolution

Rules will be strictly enforced. Violators will be penalized.

Arbiter will make the final call in all instances.

\$20 per person registration fee.
Lunch & Dinner

NAME: _____ Drivers License or Florida ID# _____

ADDRESS: _____

CITY NAME: _____

PHONE NUMBER: _____ ALTERNATE PHONE: _____

AGE: _____ SEX: Male Female EMAIL ADDRESS: _____

T-Shirt Size (Adult): S M L XL 2XL 3XL 4XL

T-Shirt with Pre-Registration 1 week in advance

MY SIGNATURE BELOW CONFIRMS MY COMMITMENT TO THE FOLLOWING:

- To uphold the program's theme of Fair Play
- To abide by the applicable tournament rules & regulations
- To participate in all attendant training courses
- To help to make the event fun and friendly for all
- To honor all other terms and conditions

RELEASE AND WAIVER OF LIABILITY

Notice: This form contains a release and waiver of liability and when signed is a contract with legal consequences. Please read it carefully before signing your name. To the CITY OF PLANTATION: In consideration of the opportunity afforded to me to participate in the activity described herein, I, the undersigned, on behalf of myself, and any descendants, ancestors, heirs, executors and administrators (hereinafter collectively "Applicant") do hereby acknowledge that I will be participating in a Program located at a CITY OF PLANTATION public facility (hereinafter "Facilities"). I understand that I am participating in "PROGRAM" at these Facilities at my own risk and that the CITY OF PLANTATION is in no way responsible for me. I hereby represent that I am in good health, I have no communicable diseases, I have no physical or medical condition that would interfere with my use of the equipment, and I have consulted with my physician to confirm that I am medically permitted and able to use the equipment.

I do hereby knowingly, freely and voluntarily release, acquit, waive, discharge and covenant to hold harmless the CITY OF PLANTATION, any and all of its departments, its officers, employees, agents, volunteers and their respective heirs, successors and assigns from any and all liability claims, causes of action, suits, controversies, contracts, promises, damages, debts, costs, expenses, loss of services, compensation, judgments, executions or demands whatsoever which may be sustained by me directly or in whole or in part which may be caused due to my own actions or inaction, due to the actions or inaction of any third party, or due to the negligence of the CITY OF PLANTATION, any and all of its departments, its officers, employees, agents, volunteers or otherwise.

I hereby give the CITY OF PLANTATION the right to refuse to allow me to participate in the Program if the City has determined in its sole discretion that it is in the best interest of the City or the Applicant.

I hereby give the CITY OF PLANTATION the authority to authorize emergency transportation and/or emergency treatment to me. I further agree to indemnify the City for the cost associated with any emergency medical services incurred by me in connection herewith.

I have read this RELEASE AND WAIVER OF LIABILITY form and fully understand that I have given up substantial rights on my behalf by signing this form and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of any and all liability to the greatest extent permitted by law and agree that if any portion of this RELEASE AND WAIVER OF LIABILITY is held to be invalid or uncon-stitutional, only that portion shall be voided and the remainder of this document shall continue in full legal force and effect.

PHOTO RELEASE

I, the undersigned, hereby grant authorization to the CITY OF PLANTATION and 50 PLUS to use photographs of myself for publicity purposes.

Signature: _____ Date: _____