

2026 Mercer County Senior Games

June 1 – June 13, 2026

Please fill out this registration form completely - front and back.

(Please Print) E-mail address: _____

NAME _____ Male () Female ()
(Last) (First)

ADDRESS _____
(Street) (City) (State) (Zip)

COUNTY _____
IF NOT MERCER COUNTY RESIDENT, SENIOR GROUP AFFILIATED _____

PHONE # (____) _____ DATE OF BIRTH _____ Proof of age may be required.

AGE BRACKET (Circle) 50-54 55-59 60-64 65-69 70-74 75-79 80-84 85-89 90+

Age bracket is determined by participant's age on day of event.

On the day of the Games, who should we contact in case of an emergency?

Name _____ Relationship _____ Phone (____) _____

List medical conditions and any special medication requirements below.

SENIOR GAMES LIABILITY RELEASE

Release and Waiver of Liability

To the best of my knowledge, information, and belief, I have no physical restrictions which would prohibit my participation in the events I have selected in the Mercer County Senior Games. I have prepared myself for the event(s) which I have entered by practicing prior to the Games. I am participating in these events voluntarily and at my own risk.

I also agree to be solely responsible for any and all costs, damages, and expenses incurred by me as a result of my participation in the Senior Games. I release members of Buhl Park, 10 Pin Alley, Tam O'Shanter, Greenville Borough/Riverside Park, Grove City Memorial Park, Buhl Community Recreation Center, Hickory High School, Mercer County Area Agency on Aging, Inc Senior Centers and Senior Games staff, volunteers, and sponsors from any responsibility or liability arising from my participation in the Games.

Mercer County Senior Games reserves the right in consultation with the Games' Trainers and Medical Personnel, to refuse any person the opportunity to compete in the Games based on her/his physical condition. The Games also reserves the right to suspend or terminate competition due to adverse weather conditions. We strongly recommend that the athletes enter only those events they are physically capable of competing in and limit themselves to a reasonable number of events.

The Senior Games staff have my permission to seek appropriate medical care at the event if it is deemed necessary for my health, welfare, and safety.

I acknowledge I have been advised by the Senior Games Committee to consult my physician with regard to practice, preparation, and competition in these events - especially those that involve high physical exertions such as running.

Signed _____ Date _____ (CONTINUED ON BACK)

T-Shirt Size (Circle One) : S M L XL XXL

Please note deadline for a t-shirt is Monday, May 25, 2026.

