



BOWLING

TEAM REGISTRATION FORM

FEB. 23 - WINTER 2019

Please fill out all information as completely as possible. All athlete participants MUST sign the Amateur Athlete Waiver and Release of Liability.

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

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Phone Number: _____

Date of Birth (mm/dd/yy): _____ Age: _____ Gender: _____ Email (Required): _____

Emergency Contact Name: _____ Emergency Contact Phone Number: _____

MEDIA RELEASE Do you give permission to release your email and phone number to members of the media interested in interviewing you about your participation in the Badger State Games? Yes No

Events: 3 person team based on averages

- Youth 550 & Above Adult 550 & Above Adult Scratch
 Youth 549 & Below Adult 549 & Below Youth Scratch

How did you hear about Badger State Games?: _____

How many times have you participated in the games? _____

Bowling Average Player 1: _____

Bowling Average Player 2: _____

Bowling Average Player 3: _____

Venue Affiliation: _____

Format:

Handicap divisions and Teams bowl three games. Total pinfall w/handicap determines your place. Cuts are to the Top 3 bowlers for medals. The 2 seed bowls against the 3 seed with the winner advancing to bowl against the top seed. Finals Format: Bronze - 2 seed vs. 3 seed of qualifying Gold - Winner of Bronze game vs. top seed of qualifying. Two practice balls prior to competition. Averages: Use your most current average listed on bowl.com USBC average to determine your division. USBC verification is the responsibility of the athlete and current sanction card must be presented when registering. Averages will be verified using Bowl.com. Enter average in "players average" section when registering online. If no verifiable average, use the following averages:
 Youth Boys: Age 12 & Under - 150 Age 13 - 21: 175 Youth Girls: Age 12 & Under - 140 Age 13 - 21: 160 Adult Men: 190 Adult Women: 160
 Minimum 21 games needed to assign average. Advancement to semi-final rounds is based on score plus handicap. Handicap is 100% of 220 average in all divisions. The average adjustment (rule 319e) is waived for this tournament. Definitions: (Age determined as of the first day of the event). Youth - Based on your USBC sanction card designation can be up to 21 years of age. Adult - Based on your USBC sanction card designation can be 18 years and older. Scratch - Event with no handicap Team - Any combination of three adult men and/or adult women may make up a team. Teams will be split into 549 and under, 550 and over with the 549 division using 100% handicap.
 USBC sanctioned event. If you are not sanctioned a \$5 fee will be collected to cover sanctioning. It is the bowlers responsibility to notify tournament of average change resulting in change of class.

Please fill out for our records. Thank you!

Mail/Fax recieved by 1/20/19: _____ Online until 1/21/19: _____
 Youth/Adult Team: \$78 Youth/Adult Team: \$75

On-Site Registration: \$80

TOTAL: _____ Cash Check # _____

Official Team Roster:

| Name (Please Print) | Phone Number | Age | Date of Birth | Gender | Waiver | Shirt Size |
|---------------------|--------------|-----|---------------|--------|--------|------------|
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To pay by credit card (Visa/Mastercard):

Name as appears on card: _____
 Card Number: _____ Exp. Date: _____
 CVV (3 digit code on back): _____ Signature: _____
 Billing Address: _____

Please make checks payable to:

Badger State Games
 219 Jefferson Street
 Wausau, WI 54403

Phone: 715-359-2306
 Fax: 715-359-2306

TOTAL: _____

BADGER STATE GAMES EVENT WAIVER

AMATEUR ATHLETE WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the BADGER STATE GAMES athletics/sports program, and related events and activities:

1. I certify that I am a parent or guardian of said participant, if the participant is under age 18, and I enter into this Agreement on the participant's and my behalf.
2. I agree that prior to such participation, I will, or, if I am the parent or guardian of a minor participant will instruct such participant that he or she should, inspect the facilities and equipment to be used, and if I believe anything is unsafe, I will immediately advise my coach (if I am participating as an athlete) or a supervisor of such condition(s) and refuse to participate.
3. I acknowledge and fully understand that I may be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from my own actions, inactions or negligence but the actions, inactions or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.
4. I assume all the foregoing risks and accept personal responsibility for my personal damages following my injury, permanent disability or death. I understand that medical and accident insurance is my sole responsibility and release all persons and entities from providing coverage for me.
5. Intending to be legally bound, I do hereby release, waive, discharge and covenant not to sue Wausau/Central Wisconsin Convention & Visitors Bureau, Inc., sponsor of BADGER STATE GAMES, its affiliated clubs, their respective administrators, officers, directors, agents and other employees and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from any and all liability to me, my heirs and next of kin for any claims, demands, losses or damages on account of injury, including death or damages to property, caused or alleged to be caused in whole or in part by the negligence of any releasee or otherwise in connection with association or participation in and/or arising out of my travel to, participation in and returning from participation in the Badger State Games.
6. In the event that I sustain injury or illness while participating with the BADGER STATE GAMES, I hereby authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately available to do so.
7. I hereby consent to allow my picture and/or voice or likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the BADGER STATE GAMES in any manner incidental to my participation in Badger State Games and without compensation to me.
8. I agree to accept the BADGER STATE GAMES no-refund policy. I understand that no refunds are granted based on the following
 - a) a registrant's failure to participate due to any reason,
 - b) the cancellation of the event due to weather or other acts of God.

I understand that BADGER STATE GAMES has the right to modify events based on site conditions and no refunds based on the modifications of events.

By signing the waiver you are giving us permission to release your email and phone number to members of the media interested interviewing you about your participating in the Badger State Games.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY

I HAVE READ THIS RELEASE

PARTICIPANT'S SIGNATURE

DATE

PARENT OR GUARDIAN SIGNATURE IF PARTICIPANT IS UNDER AGE 18