

# Whitley County Senior Games

## Schedule

- 9/19** ☐ Euchre Tournament @ 2pm; Autumn Trace
- 9/20** ☐ Free Throw Challenge @ 12pm; Whitley County Senior Center  
☐ Jigsaw Competition @ 1pm; Whitley County Senior Center  
☐ Trivia Night @ 7pm; Fahl Aquatic Center
- 9/21** ☐ 1 Mile Walk @ 10am or 6pm; Blue River Trail  
☐ 5k Walk @ 10am or 6pm; Blue River Trail
- 9/22** ☐ Cornhole @ 10am; Courthouse Lawn
- 9/23** ☐ Scavenger Hunt @ 10am; Camp Whitley
- 9/24** ☐ Fire Fitness Challenge @ 9:30am - 12:30pm; Journey Fitness  
☐ Moving Challenge @ 9:30am - 12:30pm; Journey Fitness



**Cost \$10.00 per person**  
**Includes:**

Participation in 1 or all events  
1 t-shirt

Meal for you and a +1 at the  
Closing Ceremonies on Oct 1st

**You can register at the  
2022 Senior Fair**

**OR**

**by turning in this form  
to Journey 333 Fitness**

Registration closed on Sept. 16th  
**\*\*no refunds will be issued\*\***

**Closing Ceremonies (with breakfast) Oct. 1st @ 9:30am @ Whitley County Senior Center**  
**THERE WILL BE A GRAND PRIZE DRAWING THAT DAY**

**Full Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Shirt Size:** \_\_\_\_\_



**September 19th - 24th**



# Whitley County Senior Games

## RELEASE OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to participate in any way in any WHITLEY COUNTY SENIOR GAMES activity ("ACTIVITY") at any time during the current calendar year I, for myself, for my personal representatives, assigns heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of WHITLEY COUNTY SENIOR GAMES Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe the conditions be unsafe, I will immediately discontinue further participating in the Activity.
2. FULLY UNDERSTAND, that: (a) WHITLEY COUNTY SENIOR GAMES ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time: and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participating in the Activity.
3. HEREBY RELEASE, DISCHARGE AND COVENANT NOT TO SUE AUTUMN TRACE SENIOR COMMUNITIES, CAMP WHITLEY, THE CITY OF COLUMBIA CITY PARKS DEPARTMENT (FAHL AQUATICS CENTER), JOURNEY 333 FITNESS, THE WHITLEY COUNTY CHAMBER OF COMMERCE, THE WHITLEY COUNTY SENIOR CENTER, OR THE WHITLEY COUNTY YMCA, its administrators, directors, agents, officers, members, volunteers, team member, and employees, other participants, any advertisers, and, if applicable, owners of premises on which the Activity takes place, (each considered one of the RELEASES herein) FROM ALL LIABILITY, CLAIMS, DEMAND LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OF ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENCE RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT 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 ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_



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**Closing Ceremonies &  
breakfast  
Oct. 1st @ 9:30am  
Whitley County  
Senior Center**