



**2024 Canada 55+ Games**  
**August 27 to 30 - Quebec, QC**  
**PRINCE EDWARD ISLAND REGISTRATION**



**PARTICIPANTS:** please complete the following and pages 1-5, 8, 9.

**Team captains** must also complete page 6.

**NON-PARTICIPANTS:** please complete pages 1, 2, 8, 9.

\*All registrants **MUST** read and sign the waiver (p.8 and p.9). Registration will be considered incomplete without a signed waiver.

**EVENTS:** \_\_\_\_\_

**AGE / OR AGE CATEGORY:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**SHIRT SIZE:** \_\_\_\_\_

Once completed, send your completed registration form to:

**Kim Knight-Picketts** (PEI Director, Canada Senior Games Association)

Email: [pei55plusgames@gmail.com](mailto:pei55plusgames@gmail.com); **Canada 55+ games registration** in the subject line.

Address: 40 Enman Crescent, Charlottetown, PEI C1E 1E6

Phone: (902) 368 6570

Cell: (902) 303 4270

**Payment:**

Cheque – Please make cheques payable to PEI 55+ Games Society Inc.

Etransfer – [55plusgamesbanking@gmail.com](mailto:55plusgamesbanking@gmail.com)

**Special notes:**

Curling – the curling schedule may include some evening games; **3** games minimum.

Bowling – bowling will be Duckpin, which is scored the same as Candlestick.

Hockey – full face masks / visors are mandatory.

- CSA or BNQ approved neck guards are required.

**Deadline: Please have your completed registration forms in to the PEI 55+ games office by May 31<sup>st</sup>, 2024.**

CSGA website: <https://canada55plusgames.com>

PEI 55+ Games website: <https://pei55plusgamessociety.ca>



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Dear participant,

You are officially invited to register in the Canada 55+ Games, which will take place in Quebec City from August 27 to 30, 2024. You will represent your province or territory at this national event.

**Please find below important information regarding registration:**

- To participate, you must be 55 years old or older (as of Dec 31, 2024).
- The competition takes place over four days, so players must be present during this period.
- Participants may only register in one event, plus the bonus 5km and/or 10 km race if they wish.

**REGISTRATION FEES : NON-REFUNDABLE OTHER THAN FOR A SUBSTANTIATED MEDICAL CONDITION.**

Please check by amount paid

- Participant Member: \$150 + taxes = \$172.46
- Participant Non-Member (NU): \$160 + taxes = \$183.96
- Non-Participant: \$110 + taxes = \$126.47

**ADDITIONAL FEES** (Team Captain/Coach/Skip submit Roster & Fee)

Please check by amount paid

- Hockey Team Registration (mandatory): \$300 (taxes included in price)
- Slo-Pitch Team Registration (mandatory): \$300 (taxes included in price)
- Curling Team Registration (mandatory): \$150 (taxes included in price)
- Golf Fee (mandatory, includes golf cart and practice round): \$150 (taxes included in price)

Registration includes:

- Two (2) to Four (4) days of competition (depending on event) as participant or non-participant.
- Airport scheduled shuttles on August 26 and 27 and August 30 and 31.
- Welcome meal with Opening Ceremony and Closing Ceremony Dinner
- Shuttles from official hotels to/from Welcome Center, Event venues and special evening activities

Once your registration is complete, you will receive a confirmation email and a link to register for other activities non-event related offers (special evenings, shuttles, lunch meal plans, etc.).

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**To be completed by ALL participants and non-participants**

**PLEASE PRINT CLEARLY OR TYPE WHEN POSSIBLE**

**Personal information:**

Last name \_\_\_\_\_

First Name: \_\_\_\_\_

Classification to compete in: Female  Male

Date of Birth (mm/dd/yy): \_\_\_\_\_

Age on December 31, 2024: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Prov/Terr.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Dietary needs (Vegetarian, vegan, gluten free, allergies, diabetes, etc.)

\_\_\_\_\_

Special needs (wheelchair, hearing impaired, etc.) Let us know if you have any special needs and someone from the organising committee might contact you for further information :

\_\_\_\_\_

\_\_\_\_\_



**EVENT REGISTRATION FORM**  
**Pages 3-5. To be completed by participants only**  
**(event may not be changed after registration deadline)**

**Age categories vary depending on the event; please refer to the rules by checking the following website.**  
<https://canada55plusqc.ca/disciplines/>

\*Team Roster Form is required and is to be submitted only by the Team Captain/Coach/Skip. All other players are to include only the name of the Team Captain/Coach/Skip. Sections are in green

<b>Events:</b>	<b>Please choose your event (only one choice is possible).</b>	<b>Circle the age category in which you will be competing.</b>
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<b>8-Ball</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men	55+	65+	75+
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<b>Bowling DUCKPIN</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men				
	<input type="checkbox"/> Simple-scratch	55+	65+	75+	85+
	<input type="checkbox"/> Open Team    Handicap: _____ Partner: _____	55+	65+	75+	85+

<b>Badminton</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men					
	<input type="checkbox"/> Double    Partner: _____	55+	60+	65+	70+	75+
	<input type="checkbox"/> Mixed    Partner: _____	55+	60+	65+	70+	75+

<b>Bridge</b>	<input type="checkbox"/> Open Pairs Partner: _____	55+				
	<input type="checkbox"/> Contract    AND/OR <input type="checkbox"/> Duplicate					

<b>Cribbage</b>	<input type="checkbox"/> Open Pairs Partner: _____	55+				

<b>Darts</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men <input type="checkbox"/> Single		55+	65+	75+
	Doubles	<input type="checkbox"/> Women Partner: _____	55+	65+	75+
		<input type="checkbox"/> Men Partner: _____	55+	65+	75+
		<input type="checkbox"/> Mixed Partner: _____	55+	65+	75+



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<b>Shuffleboard</b>	<input type="checkbox"/> Open Doubles Partner: _____	55+	70+
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<b>Golf*</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men	<input type="checkbox"/> Callaway <b>OR</b>	55+			70+			
		<input type="checkbox"/> Low Net <b>OR</b> <input type="checkbox"/> Low Gross	55+	60+	65+	70+	75+	80+	85+
		GC Index: _____ (*proof of index MUST be presented at event registration)							
		Will be participating in the practice round, August 28 ? <input type="checkbox"/> Yes <input type="checkbox"/> No							

<b>Ice Curling*</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men <input type="checkbox"/> Mixed Skip: _____	55+	65+
	<input type="checkbox"/> Open Skip: _____	75+	

<b>Ice Hockey*</b>	<input type="checkbox"/> Women Team name _____ Captain _____	55+	60+		65+
	<input type="checkbox"/> Men Team name _____ Captain _____	55+	60+	65+	70+

<b>Pickleball</b>		Skill Level			55+	65+
		3.0	3.5	4.0+		
	<input type="checkbox"/> Women Partner _____					
	<input type="checkbox"/> Men Partner _____					
<input type="checkbox"/> Mixed Partner _____				55+	65+	

<b>Scrabble</b>	<input type="checkbox"/> Expert (A 1100 +) <input type="checkbox"/> Intermediate (B 700 – 1099) <input type="checkbox"/> Beginner (C 0 – 699)	55+
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<b>Slo-pitch*</b>	<input type="checkbox"/> Mixed Captain: _____	55+	65+
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<b>Swimming</b> Choose a maximum of 4 swimming events plus the FUN RELAY	<input type="checkbox"/> Women <input type="checkbox"/> Men							
	Freestyle <input type="checkbox"/> 50 m <input type="checkbox"/> 100 m	55+	60+	65+	70+	75+	80+	85+
	Backstroke <input type="checkbox"/> 50 m <input type="checkbox"/> 100 m							
	Breaststroke <input type="checkbox"/> 50 m <input type="checkbox"/> 100 m    Butterfly <input type="checkbox"/> 50 m							
Individual Medley <input type="checkbox"/> 100 m    FUN RELAY <input type="checkbox"/>								
<b>Predicted Swim</b> <input type="checkbox"/> 100 m <input type="checkbox"/> 200 m <i>(*can enter one or both but cannot enter any timed events)</i>	55+							

<b>Table Tennis</b>	<input type="checkbox"/> Women Single	<input type="checkbox"/> Women Doubles Partner: _____	55+	65+	75+
	<input type="checkbox"/> Men Single	<input type="checkbox"/> Men Doubles Partner: _____			
	<input type="checkbox"/> Mixed Double    Partner: _____		55+	65+	75+

<b>Tennis</b>	<input type="checkbox"/> Women Double    Partner: _____	55+	60+	65+	70+	75+
	<input type="checkbox"/> Men double    Partner: _____	55+	60+	65+	70+	75+
	<input type="checkbox"/> Mixed Double    Partner: _____	55+	60+	65+	70+	75+

<b>Track &amp; Field</b> Maximum of 4 track or field events plus the FUN RELAY	<b>Track event:</b> <input type="checkbox"/> 50 m <input type="checkbox"/> 100 m <input type="checkbox"/> 200 m <input type="checkbox"/> 400 m <input type="checkbox"/> 800 m <input type="checkbox"/> 1500 m <input type="checkbox"/> 3000 m <input type="checkbox"/> FUN RELAY	55+	60+	65+	70+	75+	80+	85+
	<b>Field event:</b> <input type="checkbox"/> Discus <input type="checkbox"/> Javelin <input type="checkbox"/> Shot Put <input type="checkbox"/> Long Jump <input type="checkbox"/> Triple Jump <input type="checkbox"/> Fun-Relay							
	<b>Predicted Walk</b> <input type="checkbox"/> 400 m <input type="checkbox"/> 1000 m <b>Note:</b> participants CANNOT enter any timed events (exception- fun relay) but may enter a maximum of 2 field events if places are still available.							

<b>Bonus Event</b> (Each competitor must be registered in one event to participate in the bonus.)							
<b>RACE</b>	<input type="checkbox"/> Women <input type="checkbox"/> Men						
	<input type="checkbox"/> 5km <input type="checkbox"/> 10km	55+			65+		



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**TEAM ROSTER**

**To be completed by Team Captain/skip or coach for Slo-pitch, Ice Hockey and Ice Curling**

TEAM CONTACT INFORMATION: (ONE PER TEAM)

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Team Members - Age on Dec. 31, 2024.

EX :	JOHN SMITH	67
1		
2		
3		
4		
5		
6		
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Team Captain, Coach or Skip : \_\_\_\_\_



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## **AUTHORIZATION, WAIVER AND CONSENT**

### **To be completed by participants and Non-participants**

**Risk:** I am participating voluntarily in the Canada 55+ Games. In consideration of my participation, I thereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the Canada 55+ Games, its activities, events and programs. The risks, dangers and hazards include, but not limited to contracting Covid-19 or any other contagious disease; exposure to COVID-19 or any other contagious disease. I further state that I am in proper physical condition to participate in these Games.

**CODE OF CONDUCT:** MUST read the “Code of Conduct” prior to signing this waiver

The purpose of the Code of Conduct is to ensure a safe and positive environment by making individuals aware that there is an expectation of appropriate behavior consistent with the Code. The Canada 55+ Games support equal opportunities, prohibit discriminatory practices, and are committed to providing an environment in which all individuals are treated with respect and fairness.

Any violation of the Code of Conduct or any behavior contrary to the spirit of the Canada 55+ Games may be reported to the CSGA Disciplinary Committee and may be subject to disciplinary action. The type of discipline will depend on the severity of the infraction and may result in full suspension of the Games privileges, including removal from competition.

### **PRIVACY**

As the result of my registration as a participant/non-participant in the Canada 55+ Games, the Host and CSGA will receive personal information from me. Personal information received from me will be held securely and in confidence and will be used only for the purpose of determining eligibility, age category, appropriate level of competition, information sharing, promotion, and statistical reporting for the Canada 55+ Games. I consent to the uses listed above.



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**AUTHORIZATION TO USE WRITTEN MATERIALS/PHOTOGRAPHS/VIDEOGRAPHY:**

I, hereby authorize the Canadian Senior Games Association (CSGA), and the Host to use, reproduce and/or publish photographs as described below and waive any right to receive remuneration of any kind. I hereby forever release and discharge the CSGA, the Host and their representatives and any person acting under their authority from any claims of any kind arising out of or in connection with the use as stated below, including, without limitation, any and all claims for invasion of privacy and libel. I agree to waive any right to approve such use or disclosure now and in the future.

**Description of Material:** Photograph(s), videos and/or printed material produced for exhibits, websites, and trade shows for publicity of the Canada 55+ Games in general, both nationally and at the provincial/territorial level.

**CONSENT REGARDING MEDICAL & PERSONAL INFORMATION:**

I hereby grant to the CSGA and the Host the following rights to use and disclose my personal information given by me as the result of my participation in the Games.

In the event of injury, medical emergency or an existing condition requiring treatment during the Games, to disclose my personal information (including CSGA Health Form), collected during the registration process to the CSGA, the Host and medical professionals for the continuity of care.

If I am removed from play for medical reasons, to disclose information pertaining to my removal from play, including the specific medical condition or injury, to the Host and CSGA.

**RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT:**

Liability Waiver and Release: In consideration of my participation in the Canada 55+ Games, I waive any and all claims I may have against, and release from all liability, and agree not to sue the Host City and the Canadian Senior Games Association, the venues where the Games are being played and their respective directors, officers, servants, agents, sponsors, employees, and volunteers for any personal injury, death, property damage or loss sustained by me as a result of my attendance at and participation in the Canada 55+ Games arising out of any cause whatsoever including without limitation negligence or breach of statutory duty. In addition, I grant permission to administer any medical treatment that may be required.

- By checking this box, I confirm that I have read the above information and that I give my consent.
- I consent to give the organization the right to use my email address and to receive all further information concerning the Canada 55+ Games, via newsletters. My email will not be sent to any unnecessary third party.



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**HEALTH FORM AND CODE OF CONDUCT**

**To be completed by Participants and Non-Participants**

Please detach pages 9-10 and bring with you. This form will be worn inside your name tag.

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/Terr: \_\_\_\_\_ Postal: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth (mm/dd/yy): \_\_\_\_\_ Provincial/Territory Health Card #: \_\_\_\_\_

Health Insurance Provider: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Medical Condition (e.g. Diabetes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Allergies:  Yes  No If yes, please specify:

\_\_\_\_\_  
\_\_\_\_\_

\* Please ensure you carry your allergy medication with you, if applicable. \*

List current medications & dosages:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_/\_\_\_\_/\_\_\_\_

(consent if treatment needed)

(Month) (Day) (Year)

**\* Please ensure you bring your Health Form, along with any needed health documents to registration at Games time. The Health Form MUST be worn inside your name tag for the duration of the Games. \***



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## **Code of Conduct**

The purpose of the Code of Conduct is to ensure a safe and positive environment by making individuals aware that there is an expectation of appropriate behaviour consistent with the Code.

All participants of the Canada 55+ Games are expected to:

- Act as Ambassadors for their local sports clubs and their province/territory.
- Participate in the spirit of fair play, co-operation, and respect for others at all times.
- Respect the rules of their event, the CSGA and the Host.
- Respect their opponents and the directions and decisions of coaches, managers and officials.
- Be gracious in victory and in defeat.
- Respect the rights of the residents of the Host communities.
- Regard participation in the Canada 55+ Games as a privilege.
- Conduct themselves in accordance with the CSGA's Code of Conduct Policy and to ensure that the Games take place in a safe environment and are free from harassment and discrimination for all participants.

Participants of the Canada 55+ Games will:

- Comply with rulings by officials, coaches or any other person in a position of authority or responsibility.
- Respect the Clean Air policy and ban on smoking at all Games' venues and facilities.
- Obey all federal and provincial/territorial laws and municipal by-laws regarding the use and /or possession of alcohol, other drugs and/or tobacco.
- Be punctual for all Canada 55+ Games functions and activities.

Participants of the Canada 55+ Games will not:

- Verbally or physically abuse other participants in the Canada 55+ Games.
- Show disrespect to officials, use foul language or make obscene or offensive gestures.
- Breach any of the rules of their event, the Canada 55+ Games or the Host.
- Abuse, damage or destroy facilities, property or equipment.
- Bet or take part in illegal gambling.
- Breach the requirements of the following: the CSGA Code of Conduct Policy and/or the Privacy Policy and or
- Indulge in ANY other conduct which brings the Canada 55+ Games into disrepute, including but not limited to those activities identified in the CSGA Code of Conduct Policy.

**\*\* The Code of Conduct is to be worn inside your name tag for the duration of the Games.\*\***



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## La détente assurée

## Relaxation Guaranteed

SécuriGlobe est le plus important courtier en assurance voyage au pays. Depuis plus de 20 ans, nous faisons de l'assurance voyage notre spécialité et notre unique expertise.

SecuriGlobe is Canada's largest travel insurance broker. Travel insurance has been our specialty and unique expertise for over 2 decades.



Soyez assurés lors de vos déplacements, hors de votre province. Soumission Gratuite!

Be insured even when you are traveling inside Canada. Free Quote!

**Important**

Cabinet en assurance de personnes | Firm in the insurance of persons