

1. MAIL IN REGISTRATION INFORMATION AND FORMS

REGISTRATION DEADLINE: July 15, 2010

APPLICATIONS WILL ONLY BE ACCEPTED IF:

1. They are complete, accurate and legible.
2. *All fees accompany registration, made out to: Dublin Special Events Council.* No post-dated checks will be accepted, **US FUNDS ONLY**. Checks must be written from an American drawn bank or an American money order must be utilized.
3. They have arrived postmarked no later than July 15, 2010.
4. The applicants meet the eligibility requirements.

REGISTRATION FORM INSTRUCTIONS FOR MAIL IN REGISTRATIONS

(Please read before filling out form)

1. **Print the registration form.** Photocopies will be accepted. Feel free to make as many copies as you wish.
2. Review "**Sport Descriptions**" on pages 15-68.
3. At this location there are a listing of all sports, events, classifications and a computer code number. Sports appear in bold type. Events for each sport are listed under the sport and are followed by the appropriate computer code number. Transfer all code numbers to the registration form.
4. After selecting the sports and events you wish to enter, list them in "Part A" "**SPORTS & EVENTS**" section of the "**GAMES REGISTRATION FORM**". List each sport and each different event within the sport separately. Also include your classification. Most importantly, transfer the corresponding computer code number for each event to the registration form.
5. The fee structure has been established as follows:
 - Prior to July 15th, 2010, the Games registration fee is **\$95.00**. Each team member must pay this fee. (There are no "Team Fees"). Each event will be an additional **\$5.00**. (See [sample forms](#) on page 76)
 - After July 15, 2010 there will be a late fee of **\$25.00 US PROVIDING** the individual Event Coordinator and the Sports Chairman approves said late entry.
6. Calculate your fee and enter the amount in the "Total Part A" section of "Part A" "**SPORTS & EVENTS**".
7. Total your fees from the "**SPORTS EVENTS**" and transfer this amount to the "Part C" "Entry Form Registration Fees" in the "Part A Total" section.
8. Go to "Part B" "**OPTIONAL FEES**". Enter the total per person fee in the appropriate spot.
9. Calculate your fees and enter the amount in the "Total Part B" section of "Part B" "**OPTIONAL FEES**".
10. Total your fees from the "**OPTIONAL FEES**" and transfer this amount to the "Part C" "Entry Form Registration Fees" in the "Part B Total" section.

11. Calculate your Total Registration Fees. Check your dates for the proper registration fee. Calculate your totals for "Part A", "Part B", and Late fee. Place your total under "Total Registration Fees.
12. Read the **WAIVER OF LIABILITY, IMAGE RELEASE FORM, EMERGENCY INFORMATION**, and **ACKNOWLEDGMENT OF RULES AND REGULATIONS** carefully before signing. You must sign and return these completed forms with your registration to be accepted for the 2010 Games.
13. Enclose a check or money order for the total amount, payable in **US FUNDS ONLY**, to **Dublin Special Events Council**. **NO CANADIAN CHECKS**. Checks must be drawn on an American Bank. American Money Orders only will also be accepted. Visa and MasterCard are accepted.
14. Complete the "[Additional Information](#)" **Section (pg 73)** if participating in Golf, Bowling, any Team Event; any Event with a weight class and any event where you have a partner or will be requesting that a partner be assigned to you.
15. Mail the completed registration form(s) along with your check, money order or credit card information to:

Dublin 2010 Can-Am Police-Fire Games
C/o Dublin Convention & Visitors Bureau
9 S. High St., Dublin, OH 43017
Phone: 1-800-245-8387 Fax: (614) 760-1818

REGISTRATION ENTRY FEES:

Fees:	Prior to July 15, 2010	Games Registration Fee.....	\$95.00
		Event Fee	\$5.00
	After July 15, 2010	Late fee.....	\$25.00

Additional Sport/Event Fees:

- Golf green fees -\$301 per person for 4 rounds and power carts (**to be paid with registration**)
- Bowling - \$ 8.00 per person per 3 games series (to be paid on site) (includes shoe rental)
- Rifle Large Bore - \$10 per person (**to be paid with registration**)
- Rifle Small Bore - \$10 per person (**to be paid with registration**)
- Skeet - \$30.00 per 100 targets (to be paid on site)
- Sporting Clays - \$30.00 per 100 targets (to be paid on site)
- Trapshooting - \$30.00 per 100 targets (to be paid on site)
- Benchpress, Deadlift and Powerlifting require an IPA membership card - \$ 30.00 for IPA card; can be paid at the venue or available on the IPA website. [IPA Card Application Form](#)

Social Event Fees:

- Tuesday - Putt, Pints & Party \$5 registration fee (**to be paid with registration**)
- Friday - Caribbean Splash \$15 registration fee (**to be paid with registration**)
- Saturday - Hog Night \$25 registration fee (**to be paid with registration**)
- **TEAM FEES:**
- Baseball, Ice Hockey, Lacrosse, Soccer, Softball (Slow Pitch) and SWAT have a \$500US team fee
- The team fee is submitted by the Captain of the team when registering along with the team name and team roster
- Team members will NOT be considered as registered until the Captain completes this process.
- All team members pay the \$5 Event Fee

2010 Can-Am Police-Fire Games Registration Form

Registration Postmark Deadline: July 15, 2010

Please return completed form to: Dublin 2010 Can-Am Police-Fire Games

C/o Dublin Convention & Visitors Bureau

9 S. High St., Dublin, OH 43017

Phone: 1-800-245-8387

Fax: (614) 760-1818

Type or Print requested information – form will be returned if not complete

Last Name	First Name Middle Initial
Date of Birth: Month Day Year / / /	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Age on 8/15/10: yrs.
Home Address:	Home Phone: ()
City, Province/State, Postal Code/Zip Code	Home FAX: ()
Home Email:	Cell Phone: ()
Agency (Active or Retired From):	If applicable, Retirement Date
Date of Hire: (month/date/year)	
Agency Address:	<input type="checkbox"/> Check if entered as spouse
Agency City, Province/State; Postal Code/Zip Code	Work Phone: ()
Work Email:	Work FAX ()
Agency: <input type="checkbox"/> Police <input type="checkbox"/> Fire <input type="checkbox"/> Sher <input type="checkbox"/> Corr <input type="checkbox"/> Fed <input type="checkbox"/> State Other (Specify): Type:	T-shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
Agency Position/Title (if spouse, enter spouse's Position/Title):	

Phone: _____ Fax: _____ Email: _____

Method of Payment Check # _____ Money Order (\$US)

Visa/MasterCard Number: _____

Expiration Date: _____

Cardholder Name: _____

(As shown on card)

Signature: _____

Part A

Sports & Events (Please refer to instructions on page 69 for completion)

No.	Sport	Event	Class		C	O	D	E	S	Fees
	Registration Fee									\$ 95.00
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										

Total Part A

Part B

Additional and Optional Fees

Event	Per Person Fee	\$ Amount

Total Part B

Part C

Entry Form Registration Fees

Part A Total	\$
Part B Total	\$
Late fee \$25.00 (if postmarked after July 15, 2010)	\$
Visa <input type="checkbox"/> Master Card <input type="checkbox"/>	m y Expiry Date / / / Card #
Cardholder Name:	
Total Registration Fees	\$
Federal/State Tax (0%)	\$0.00
Total Amount Due (US FUNDS)	\$

2. EMERGENCY CONTACT INFORMATION

Emergency Information

<i>Name of contact person in case of emergency: Phone Number</i>	<i>Daytime Phone Number</i>	<i>Evening</i>
Personal Physician Name and Phone Number:		
<i>Medical History (including significant diseases, allergies, current medications, surgeries, etc.) (if additional space is required, please include separate sheet)</i>		
<p>PLEASE NOTE: If you are competing in the following sports, you must submit a medical release, signed by a licensed physician, based on a physical completed within six months of competition. This release should be in the form of a doctor's note stating fitness to compete in a contact sport.</p> <p>JUDO KARATE SUBMISSION GRAPPLING</p>		

3. ADDITIONAL INFORMATION

ADDITIONAL INFORMATION

1. Team Sport Name: _____ Team Captain: _____
2. Team Sport Name: _____ Team Captain: _____
3. Partner(s): _____ 4. Your Golf Handicap: _____
GHIN/RCGA# _____
5. Bowling Average: _____ 6. Weight (if Applicable): _____
7. Pooling: If you wish to participate in a team or partner event and do not have a team or a partner then check the box.

The Event Coordinator will select your partner or team subject to pooling restrictions and approvals.
(This excludes SWAT.)

Please read the attached **WAIVER OF LIABILITY, IMAGE RELEASE FORM, EMERGENCY INFORMATION, AND ACKNOWLEDGMENT OF RULES AND REGULATIONS** carefully before signing. You must sign and return these with your registration to be accepted for the 2010 Games.

4. WAIVER OF LIABILITY

For and in consideration of the granting of permission to participate in the Dublin 2010 CAN-AM POLICE-FIRE GAMES hosted by Dublin, Ohio, and to be held in and around Dublin, Ohio, between the dates of August 15th to August 22nd, 2010. The undersigned on behalf of himself/herself, his/her heirs, his/her executor, administrators, and signs, hereby, fully releases and discharges the Games Directors and, the Can-Am Police-Fire Games Federation, The Crowne Plaza Hotel(Dublin), the Dublin Special Events Council and its partners, and its members, agents, employees and servants, assigns and successors, from any and all rights, claims, action and liabilities of any kind, even though that liability may arise out of negligence or carelessness on the part of the persons or parties named in this release for damages which the undersigned and his/her above mentioned successors now have or may hereafter the signing of this agreement have against the aforementioned The Crowne Plaza Hotel (Dublin), and their successor arising out of any bodily injury of any sort or nature suffered by the undersigned, by reason of his/her voluntary participation in any of the activities of the Dublin 2010 Can-Am Police-Fire Games. The Undersigned has read this General Release of Liability and fully understands and hereby assumes full responsibility for any injuries, damages and losses that he/she may incur from the above mentioned participation in any of the activities of the Dublin 2010 Can-Am Police-Fire Games. The undersigned agrees that prior to participating they will inspect the facilities and equipment to be used and fully understand that each participant will be engaging in activities that involve risk or serious injury, including permanent disability and death, and severe social and economic losses which might result from their own or others' action, inaction's or negligence, the rules of play, or the condition of the premise or any of equipment's used. Further, the undersigned acknowledges that there may be other risks not known to us or not reasonably foreseeable at this time. This release is freely and voluntarily executed by the undersigned and in executing this General Release of Liability does not rely on any inducements, promise or representations made by the City of Dublin and/or its members, agents, employees or servants.

IMAGE RELEASE FORM

I hereby give to Can-Am Police-Fire Games Federation Inc. and Dublin Special Events Council permission to photograph and record my image and voice on still photographs, motion picture film, audio tape, video tape or digital media and to use this material in whole or in part, now and in the future, through the media of television, film, Internet, multi-media presentation, radio, audiotape, videotape, in printed form and display form for the promotion of the Can-Am Police-Fire Games and its stated mission. I hereby assign and transfer to the Can-Am Police-Fire Games Federation Inc. any and all proprietary rights, including copyright, and waive all personality rights, which I may have in this material.

I, on my own behalf:

GIVE my permission as set out above: _____ (please initial)

DO NOT give my permission as set out above: _____ (please initial)

Your personal information is used only for the purposes stated on or indicated by the form.

ACKNOWLEDGMENT OF RULES AND REGULATIONS, WAIVER AND RELEASE

The undersigned agrees to abide by all rules and regulations of the Dublin 2010 Can-Am Police-Fire Games. The undersigned agrees to refrain from using controlled substances illegally during competition and while at the Games. The undersigned agrees to refrain from unsportsmanlike conduct or any conduct bringing discredit upon the law enforcement and fire fighting profession or the Can-Am Police-Fire Games.

Date: _____ Print Name: _____

SIGNATURE: _____

5. SAMPLE REGISTRATION FORMS

PART A

Sports & Events (Please refer to [instructions](#) on page 69 for completion)

N	Sport	Event	Class		C	O	D	E	S	Fees
	Registration Fee									\$95.00
1.	Skeet All Events	"A"	Single		S	K	0	3	D	\$5.00
2.	Sporting Clays	"A"	Single		S	C	0	1	A	\$5.00
3.	Sporting Clays	Top Gun	Single		S	C	0	3	D	\$5.00
4.	Trap Shooting	16vd "A"	Single		T	S	0	1	A	\$5.00
5.	Trap Shooting	21vd "A"	Single		T	S	0	3	A	\$5.00
6.	Trap Shooting	Doubles	Single		T	S	0	4	A	\$5.00
7.										
8.										
9.										
10										

Total Part A

\$125.00

Part B Additional and Optional Fees

Event	Per Person Fee	\$ Amount
Opening Ceremonies	FREE	FREE
Caribbean Splash	\$15.00	\$15.00
Hog Night	\$25.00	\$25.00

Total Part B

\$40.00

Entry Form Registration Fees Part C (see above for additional sporting fees due on site)

Part A Total	\$125.00
Part B Total	\$40.00
Late fee \$25.00 (if postmarked after July 15, 2010)	\$0.00
Visa <input type="checkbox"/> Master Card <input checked="" type="checkbox"/> Cardholder Name: Joe Competitor	Expiry Date m y / 01 / 11 / Card # xxxx xxxx xxx
Total Registration Fees	\$165.00
Federal/State Tax (0%)	\$0.00
Total Amount Due (US FUNDS)	\$165.00

6. FIREARMS INFORMATION

We hope, by providing the information below, those wishing to attend the **Dublin 2010 Can-Am Police-Fire Games** will find their movement across the border with firearms a little easier.

Firearm Users Visiting the United States

A permit must be obtained from the ATF for transporting firearms into the US. The application link below is the ATF form that must be filled out and returned to the ATF. Applicants may mail the form to the address in the instructions, or fax it to 304-616-4554. It takes approximately 6 weeks to receive the permit.

Airlines may have their own additional requirements on the carriage of firearms and the amount of ammunition that you may have in your checked baggage. Therefore, **travelers should also contact the airline regarding its firearm and ammunition carriage policies.**

Application/Permit for Temporary Importation of Firearms and Ammunition by Nonimmigrant Aliens

<http://www.atf.gov/forms/pdfs/f53303d.pdf>

Traveling with firearms and ammunition in the United States:

www.tsa.gov/travelers/airtravel/assistant/editorial_1666.shtm

Travelling with firearms within Ohio:

<http://codes.ohio.gov/orc/2923.16>

For firearms related inquiries please contact:

SRO Brian Nimmo

E-mail: bnimmo@dublin.oh.us