



2025

SOUTH GEORGIA PRIME OLYMPICS REGISTRATION & INFORMATION PACKET



SATURDAY, SEPTEMBER 20, 2025

FOR AGES 50+ AS OF JANUARY 1, 2025

MOULTRIE-COLQUITT COUNTY PARKS & RECREATION AUTHORITY

(229) 668-0028 | 1020 4TH STREET SW MOULTRIE, GA 31768

WWW.MCCPRA.COM



2025 SOUTH GEORGIA PRIME OLYMPICS REGISTRATION

REGISTRATION DEADLINE: FRIDAY, AUGUST 29TH

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ AGE (AS OF 1/1/25): _____

EMAIL: _____

SEX (PLEASE CHECK ONE): ☐ MALE ☐ FEMALE

CATEGORY (PLEASE CHECK ONE): ☐ SITTING ☐ STANDING

SHIRT SIZE (ADULT SIZES - PLEASE CHECK ONE):

☐ SMALL ☐ MEDIUM ☐ LARGE ☐ X-LARGE ☐ 2X ☐ 3X

AGE BRACKET: ALL INDIVIDUAL EVENTS WILL BE HELD IN 5 YEAR AGE
BRACKETS. (PLEASE CHECK ONE)

☐ 50-54 ☐ 55-59 ☐ 60-64 ☐ 65-69 ☐ 70-74 ☐ 75-79 ☐ 80-84 ☐ 85-89 ☐ 90+

RULES AND ADDITIONAL INFORMATION CAN BE FOUND ON PAGE 5.

USE THE FOLLOWING PAGES TO SELECT INDIVIDUAL AND TEAM EVENTS.
PLEASE BE SURE YOUR EVENT TIMES DON'T OVERLAP.

AMOUNT TOTAL: _____

PLEASE SEND PAYMENT AND REGISTRATION FORMS INCLUDING PAGES 1-5 TO:

MCCPRA
ATTN: SOUTH GEORGIA PRIME OLYMPICS
PO BOX 1749
MOULTRIE, GA 31776



INDIVIDUAL EVENTS

\$5 FOR EACH EVENT

SELECT THE EVENT BY CHECKING THE BOX. BE SURE YOUR TIMES DON'T OVERLAP	EVENT	TIME	LOCATION
☐	BASKETBALL THROW	9 AM	TOMMY MEREDITH GYM
☐	CORNHOLE TOURNAMENT (SINGLES)	9 AM	GOFF COMPLEX
☐	FRISBEE THROW	9 AM	GOFF COMPLEX
☐	RUNNING (5K)	9 AM	START TRAIL AT GOFF COMPLEX
☐	CLOCK GOLF	10 AM	GOFF COMPLEX
☐	HORSESHOE TOSS	10 AM	GOFF COMPLEX
☐	Wii BOWLING	10 AM	TOMMY MEREDITH GYM
☐	½ MILE WALK	11 AM	START TRAIL AT GOFF COMPLEX
☐	WHEELCHAIR RACE	11 AM	START TRAIL AT GOFF COMPLEX
☐	FOOTBALL THROW	11 AM	GOFF COMPLEX

TOTAL NUMBER OF EVENTS: _____ X \$5 = \$_____

SEE NEXT PAGE FOR SWIMMING EVENTS. 2



SWIMMING

INDIVIDUAL EVENTS

\$5 FOR EACH EVENT

SELECT THE EVENT BY CHECKING THE BOX. BE SURE YOUR TIMES DON'T OVERLAP	EVENT	TIME	LOCATION
☐	50 YARD FREESYTL	10 AM	SOUTHWEST MEMORIAL POOL
☐	100 YARD FREESTYLE	10:15 AM	SOUTHWEST MEMORIAL POOL
☐	500 YARD FREESTYLE	10:30 AM	SOUTHWEST MEMORIAL POOL
☐	50 YARD BREASTSTROKE	10:45 AM	SOUTHWEST MEMORIAL POOL
☐	100 YARD BREASTSTROKE	11 AM	SOUTHWEST MEMORIAL POOL
☐	200 YARD BREASTSTROKE	11:15 AM	SOUTHWEST MEMORIAL POOL
☐	100 YARD INDIVIDUAL MEDLEY	11:30 AM	SOUTHWEST MEMORIAL POOL

TOTAL NUMBER OF EVENTS: _____ X \$5 = \$_____

Please note: This is a general timeline of events. Event times and age bracket groupings are subject to change based on the number of participants registered. A finalized schedule with detailed event times and groupings will be provided by Friday, September 12th.



TEAM EVENTS

SELECT THE EVENT BY CHECKING THE BOX. BE SURE YOUR TIMES DON'T OVERLAP	EVENT	TIME	LOCATION
☐ \$10	PICKLEBALL	9 AM	MOSELEY TENNIS COMPLEX
TEAM MEMBERS NAMES: 1. _____ 2. _____			
☐ \$10	TENNIS	9 AM	MOSELEY TENNIS COMPLEX
TEAM MEMBERS NAMES: 1. _____ 2. _____			
☐ \$15	BASKETBALL	11 AM	TOMMY MEREDITH GYM
TEAM MEMBERS NAMES: 1. _____ 2. _____ 3. _____			

TOTAL OF EVENTS: = \$_____

Rules & Policies

Event times and age bracket groupings are subject to change based on the number of participants registered. A finalized schedule with detailed event times and groupings will be provided by Friday, September 12th.

Sitting vs. Standing Category: Sitting is designed for those participants whose physical mobility is dependent upon supportive devices such as wheelchairs or walkers.

In case of inclement weather, unusual or extenuating circumstances, MCCPRA reserves the right to postpone, cancel, and/or consolidate events.

Waiver

I hereby acknowledge that there are obvious risks of injury involved in participation in all sports activities and, specifically, the sports activities for which I have registered as set forth above. I hereby give permissions for official records to be checked for age/residency verification. I assume all risks and hazards incidental to such participation, including transportation to and from activities. I do hereby waive, release, absolve and indemnify and agree to hold harmless the Moultrie-Colquitt County Parks and Recreation Authority, City of Moultrie, Colquitt County Commissioners, sponsors, supervisors, participants and persons involved in said activities for any claim arising out of injury. I do hereby covenant not to file a claim or bring suit with respect to any such injury or damage.

I hereby authorize the Moultrie-Colquitt County Park and Recreation Authority (MCCPRA) and its representatives the irrevocable right to use my name, picture, photograph, or other likeness without any compensation and in perpetuity in all forms of media, and in all matters.

I hereby release and hold harmless MCCPRA from any reasonable expectation of privacy or confidentiality for myself and that I have full authority to consent and authorize MCCPRA to use my likenesses and names.

There will be NO REFUNDS given once registration is over.

SIGNATURE

In Case of Emergency

In case of emergency whom should be contacted?

Emergency Contact Name: _____

Phone Number: _____ Relationship: _____