



Missouri Health Care Association DISTRICT III

Date: September 8, 2011
To: MHCA District III Members
From: Golden Age Games Committee
Re: GOLDEN AGE GAMES – **EXTREME MAKEOVER!**

The annual Golden Age Games are scheduled for Wednesday, October 12, 2011 at Crestwood Plaza, east side off Watson from 12 Noon until 3:00 p.m. The plaza will open at 10:00 a.m. for facilities to start arriving. You may bring in food & drink from your facility or any fast food restaurant for your staff and residents. There are pizza restaurants nearby if you want delivery or for pick-up.

Each contestant that wishes to participate in the wheelchair race needs to **choose one race**: there are six races to choose from. **Remember**, you will only be allowed to participate in one race.

We will be having the spelling bee again. Due to an overwhelming response in years past, we will most likely be dividing into groups. This will be done the day of the games.

This year, there will be no singing or dancing contests. Please do not be upset as we are planning a "Talent Show" as a new event for District III: details will be coming in future months.

The games will start promptly at 12 Noon. There will be competition with 1st, 2nd & 3rd place medals awarded for the following events:

- | | |
|--|---------------------|
| 1) Men's one-handed wheel chair race | 8) Bingo |
| 2) Men's two-handed wheel chair race | 9) Volleyball Toss |
| 3) Women's one-handed wheel chair race | 10) Spelling Bee |
| 4) Women's two-handed wheel chair race | 11) Turkey Shoot |
| 5) Under 60 wheel chair race-Men & Women | 12) Horseshoe Toss |
| 6) Co-Ed power w/c race | 13) Fishing |
| 7) Bowling | 14) Laundry sorting |

This year's theme is **"EXTREME MAKE-OVER!"**

A traveling trophy will be awarded to the Facility with the most SPIRIT. We will also be awarding a 1st, 2nd and 3rd place ribbon for BEST BANNER, so show your creativeness and bring a facility banner!

There is an \$80.00 registration fee per facility to help defray costs of medals, ribbons and the plaza. Should this registration fee prevent you from participating, please contact Christine Plattner @ (314)-831-4800 and she will see if a vendor would be interested in sponsoring your facility. In order for the programs to be printed in a timely fashion, please remit your checks, payable to MHCA District III **before Friday, September 23rd**. **Please send registration form and fee to: Christine Plattner c/o St. Sophia Health & Rehab. Center 936 Charbonier Rd. Florissant, MO 63031.**

NO HELIUM BALLOONS OR FOG MACHINES ALLOWED!
HOPE TO SEE YOU THERE!

ahca

Registration Form
GOLDEN AGE GAMES

October 12, 2011

_____ will be attending the Golden Age Games.

Our Activity Director is _____:

We will have approximately _____ people (number of residents and staff) at the games.

Please mail this form and your check for \$80.00 made payable to MHCA District III to:

**Christine Plattner
c/o St. Sophia Health & Rehab Center
936 Charbonier Road
Florissant, MO 63031**

To allow time for programs to be printed, **please send this form and remittance to Christine Plattner no later than Friday, September 23, 2011.**

Spirit Competition

The Spirit Competition will be judged on the following criteria this year. Please make note of the changes.

- Resident Participation
- Costuming
- Creativity
- Theme that best represents the theme of :
 - EXTREME MAKE-OVER

We hope to see a lively and spirited group of people at the upcoming Golden Age Games.

**MHCA DISTRICT III
GOLDEN AGE GAMES
RESIDENT RELEASE FORM**

(please complete and have on file for each resident from your facility attending games)

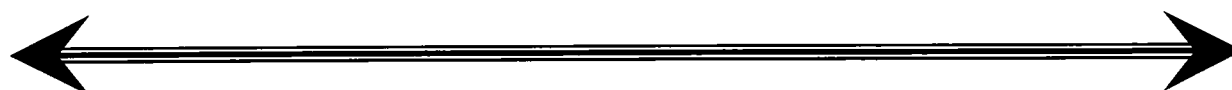
_____ may participate in the MHCA District III Golden Age
(name of resident)
Games on October 12, 2011.

(physician's signature and date)



_____ has my permission to participate in the MHCA District III
(name of resident)
Golden Age Games on October 12, 2011.

(guardian or responsible party signature and date)



I hereby release _____ (Facility) and the Missouri Health Care Association from any responsibility regarding the news media coverage of me while a contestant in the Golden Age Games and go on record as having granted permission for such coverage. I also authorize the release of my name and details concerning myself if necessary for public understanding of any photo or interview.

(signature of resident or legal guardian and date)