2014 Chippewa Flowage Pickleball Classic
Registration Form
July 19th and 20th
Treeland Resorts,
Hayward, WI

Tournament Information:

- Un-officiated Round Robin
- 80 PLAYER MAXIMUM. THE FIRST 80 REGISTRATION FORMS WILL BE SELECTED
- Medals awarded to the first three places in each division
- Play in the age group of the youngest player
- Age Groups: (Men, Women, Mixed) Up to 64, 65 and above (**Subject to change, TBD closer to event)**
- Registration Deadline: June 30, 2014 ; Late Registration July 1, 2014 thru July 9, 2014
- Questions: jeffrankins@gmail.com

Name:_____

Address:_____

E-mail Address: _____Phone:_____

Emergency Contact: Name:_____ Phone:_____

Age as of December 31, 2014:_____ DOB:____ /____/_____

Events: Registration at 8 am Saturday for 9am start Men's/Women's. Register at 7:30 am Sunday for 8 am start for Mixed Doubles.

Men's Doubles Partner Name:_____ DOB___/____/_____

Women's Doubles Partner Name:_____ DOB___/____/_____
(May be an open Division)
Mixed Doubles Partner Name: _____ DOB___/____/_____

Tournament Fees: (Fees are non refundable)

$ 35 **Minimum Base Fee** covers first event, Saturday night Pizza Party, chance at door prizes, pickleball cinch bag fruit, coffee and water. REMEMBER THIS IS A FUND RAISER FOR THE AMERICAN CANCER SOCIETY.
$ 10 Late registrations received between **July 1st and July 9th** (If the maximum of 80 participants has not been met)
$ 5 Second Event
$ 10 Additional Pass to Saturday Night Pizza Party, 12 years old and up
$ 5 Additional Pass to Saturday Night Pizza Party, 11 years old and under
$ 10 Optional Pool/Shower Fee

$_____ Total

Make checks payable to The American Cancer Society: DEADLINE June 30th. Late registration July 1 thru July 9th
Mail to Jeff Rankins, 11694N Farnsworth Rd, Hayward, WI 54843: Phone: 715-462-3176.

Waiver: I certify that I am physically fit and have sufficient abilities for this program. I consent to allow my picture or likeness to appear in any official documentary, sponsor advertisement or exclusive media coverage in any manner incidental to his/her participation in the pickleball program and without compensation to me. I agree to assume all responsibility for all risk, damage or injury that may occur to me as a participant. I release and discharge for myself, my heirs, executors and administrators Treeland Resorts, their respective administrators, directors, agents, officials and other sponsoring agencies and advertisers used to conduct this event from any and all liability, present and future which may arise in conjunction with participation in this program.

Signature: _____ Date:_____