506 South Frederick Avenue, Gaithersburg MD 20877 P: 301-258-6350

GAITHERSBURG OPEN PICKLEBALL TOURNAMENT

September 7 & 8 2019

- **Locations:** Diamond Farms Park, Morris Park and Griffith Park
- **Divisions:** Mens and Womens Doubles on Saturday
  Mixed Doubles on Sunday
- **Two levels (Self Rated):** Intermediate (2.5 - 3.5) or Advanced (4.0 - 5.0)
- **Some divisions** may be combined or cancelled due to lack of sufficient registration.
  Tournament Director reserves the right to adjust the skill brackets.
- **Format:** Round robin/Pool play schedule will be set after the registration deadline.
  Times are subject to change depending on registration numbers in each event.
  Final schedule with times will be emailed no later than September 5.
- **Cost per person (per event):** $20.00* for City of Gaithersburg Residents
  $25.00* for Nonresidents
  *$5.00 discount for second event
  (must complete a registration form for each event)
- **Registration Deadline:** until filled or Friday, August 30, 2019 (Space is limited!)
- **Email completed registration forms to:** dave.ludington@gaithersburgmd.gov

Divisions: MENS # _____ WOMENS # _____ MIXED # _____
Level: INTERMEDIATE (2.5 - 3.5) _____ ADVANCED (4.0 - 5.0) _____

Player # 1 Name: _____
Address: _____
City: _____ State: ____ Zip: _____
Best Phone #: _____
E-mail: _____
Tshirt Size _____ (if reg. received by 8/12)
City Resident $20 Non-resident $25

Player # 2 Name: _____
Address _____
City: _____ State: _____ Zip: _____
Best Phone #: _____
E-mail: _____
Tshirt Size _____ (if reg. received by 8/12)
City Resident $20 Non-resident $25

I understand that I am responsible for my insurance in case of injury. Furthermore I understand that although safety precautions will be observed, the City of Gaithersburg, employees and agents will not be responsible for any personal property lost by me or for any injury sustained in the program. I also consent to the City's use of any photographs taken or video tapes made of the program.

Additional waiver must been signed at site, at the time of tournament check in.

Player # 1 (Print name)_____ Signature_____

Player # 2 (Print name)_____Signature_____

PAYMENT: Amount Paid $_____**Cash or Check #** _____

Visa/MC/Disc/Amex#_____ **Exp.** __/___

Signature (name on card) _____

Print Name _____

OFFICE USE ONLY: #

Rec'd: _____ Initials_____
W M F Resident: Yes No
Pr: _____
Date: _____