



3rd ANNUAL YMCA JAMES RIVER OPEN A CVRA/Ektelon Championship Series Event



Location

Downtown YMCA
1315 Church Street
Lynchburg, VA. 24504
Contact: Kathy Thomas
Phone: (434) 847-5597

Tournament Director

Danny Rodriguez
RolloutVA@gmail.com
Phone: (434)-332-4980

Mail entries to above address – C/o Kathy Thomas:

Or Fax: (434)846-4702

Tournament WEB Site and Online Registration

<http://www.r2sports.com/tourney/home.asp?TID=7276>

Entry Deadline

Monday, September 27th
@ 9:00 a.m.

Starting Times Available

Wednesday, September 29th
after 7:00 p.m.

Tournament begins Friday at 4:00 p.m. All participants are required to report 30 minutes prior to match. We will try to accommodate travel schedules.

Tournament Rules

- Must be a USAR member - *Membership available at tournament*
- USAR Approved Eyewear required
- Official Ball – Ektelon Fireball Red
- Non-Winners are required to referee next match or find an acceptable substitute.
- The Tournament Director & Committee reserves the right to combine divisions and reclassify any entrant.

Hospitality: Food, snacks & beverages provided

Friday – light fare	One guest free
Saturday – breakfast, lunch & dinner	Additional guest:
Sunday - breakfast, lunch	\$15 for weekend

Entry Fees: Three event limit – 3rd event must be doubles

\$50 for Open Singles – Open Doubles
\$40 other divisions
\$20 for second event
\$10 for third event
\$20 Junior's 1st event 18 and under
\$5 discount for Military, YMCA members, Law Officers, Firefighters, and EMT's

Accommodations:

Please reference tournament WEB site for lodging information.

Prizes

*Cash prize to Open 1st and 2nd
Open Singles-\$400 for 1st, \$200 for 2nd
Open Doubles - \$200 for 1st; \$100 for 2nd (per team)
Open Mixed Doubles - \$200 for 1st, \$100 for 2nd (per team)
All other events Awarded 1st and 2nd place medals
Tournament shirt to all participants

***Prize money prorated if fewer than 10 entrants in Open singles or 8 teams in Open Doubles.**

Minimum of 5 players or teams required to be entered in each division by entry deadline or divisions may be combined or played as a round robin event.

Racquet Stringer Onsite: Carter Green

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Evening _____

Email _____

Club Affiliation _____

Shirt Size: _____ Gender: **M F** Date of Birth _____

Event: *Please check events to enter*

Singles:

Open _____ Elite _____ A _____ B _____ C _____ D _____ Novice _____
8- _____ 10- _____ 12- _____ 14- _____ 16- _____ 18- _____ 24- _____
25+ _____ 30+ _____ 35+ _____ 40+ _____ 45+ _____ 50+ _____ 55+ _____
60+ _____ 65+ _____ 70+ _____ 75+ _____

Collegiate: A _____ B _____ C _____

Doubles: Doubles Partner _____

Open _____ Elite _____ A _____ B _____ C _____

Age: 40+ _____ 50+ _____ 60+ _____

Mixed: Open _____ Elite _____ A _____ B _____ C _____

Amount enclosed: \$ _____

Check # _____

Visa/MC _____ Exp. _____

V Code _____

Waiver:

I hereby, for myself, heirs, executors, and administrators, waive and release any and all rights and claims for damage I may have against the Lynchburg YMCA, the USAR/CVRA, and other sponsors and their respective representatives for any and all injuries which may be suffered by me in connection with any participation in the tournament.

Signature: _____

(Parent must sign if participant is under 18)

Date: _____

Earliest time availability on Friday: _____

Tournament Committee: Kathy Thomas, Debby Kountz, Dave Herb, Roy Pennington, Danny Torres, Geoff Moore, Stu Young, Phil Wheeler



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