





SUMMER SLAM IN THE CREEK

Men's, Women's & Mixed Doubles Pickleball Tournament

August 17 & 18, 2019 (Please Print Clearly)

First Name:	Last Name:				
Address:					
City:	State:	Zip Code:			
Email Address:					
Telephone Number:		Date of Birth:			/
Circle desired Saturday (8/17/19) tournamen	nt:	Men's	Women's	j	
Circle desired Sunday (8/18/19) tournament:	:	Mixed Dou	ubles		
Partner's Name (M/W):(Registration form must	be submitted	Par with a partne	tner's age r's name/age e	ntered abo	ve)
Circle Your Skill Level:	3.0	3.5	4.0+		
Circle Your Partner's Skill Level:	3.0	3.5	4.0+		
Circle Your Age Group:	39 & Under	40-59	60+		
*A team's bracket placement will be determined by the you *Tournament Director reserves the right to combine skill le USAPA Rules will govern play. Games will be played to 11 p Tournament Director must change the format to accommod	vels and adjust ag oints (win by 1 po	e-brackets to evoint). All bracke	venly distribute tea	ıms within po	ols and brackets.
Registration Fee per player: \$30.00 (must I	be received b	y August 2,	2019)		

- *If registering in person at the Rec. Center, check, cash or credit card is accepted.

*If a player participates in a Saturday event (men's or women's), the Sunday Mixed Doubles event is only \$10.00 for that player. If a player does not participate in a Saturday event, the Sunday Mixed doubles event is \$30.00 per player (REVISED 7/8/19)

Participant Waiver: In consideration of your accepting my entry, I hereby for myself, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I may have against the City of Goose Creek Recreation Department, the pickleball event organizers, sponsors, and volunteers, their representatives, successors and assigns for any and all injuries suffered by me at any activity organized by these groups. I also give permission to the City of Goose Creek to use and display any photographs taken of me which may be forwarded to newspapers and other publications in which the photograph would be associated with the City of Goose Creek.

SUMMER SLAM IN THE CREEK

INFORMATION SHEET

<u>Registration:</u> Registration closes on August 2, 2019 or when the player limit is reached. Checks can be made payable to the City of Goose Creek Recreation Department and sent to the following address:

City of Goose Creek Recreation Department 519-A North Goose Creek Blvd. Goose Creek, SC 29445

You may also register in person at the Michael J. Heitzler Recreation Complex.

<u>Wait List, Refunds and Substitutions:</u> Teams or individual players wanting to play after registration closes will be added to the wait list. A full refund will be given for any team or player withdrawals prior to the close of registration. <u>After registration closes, no refunds will be given</u>. Player substitutions can be made prior to August 9, 2019 as necessary. Player substitutions after August 9, 2019 are at the discretion of the Tournament Director.

Other Event Details: This is an indoor tournament using six (6) clearly marked courts in two gymnasiums. A team's age will be determined by the youngest player and a team's skill level will be determined by highest rated player on the team. A player's age is determined by his/her age on September 1, 2019. Winner and runner-up awards will be presented for each age category and division bracket (Men's and Women's competition). All players will receive a complimentary tournament gift bag. Food and water will be provided. Singles competition is not offered.

Tournament Schedule:

Saturday August 17, 2019 8:30am – Men's & Women's Teams check-In 9:00am – Men's & Women's tournament play begins

Sunday August 18, 2019
8:30am – Mixed Doubles Teams check-In
9:00am – Mixed Doubles tournament play begins

Start times and pool and court assignments will be determined once registration closes and will be emailed to all participants.

If you do not receive a "welcome" email by August 6, 2018, please contact T.J. Rostin to verify your email address and that you are registered.

Contact Name/Email: T.J. Rostin tjrostin@cityofgoosecreek.com 843-569-4242