

**GAMMA ETA'S PICKLEBALL TOURNAMENT FUNDRAISER  
(TO BENEFIT ST. JUDE CHILDREN'S RESEARCH HOSPITAL)**

**WHEN: NOVEMBER 6, 2019**

**WHERE: ARC (ACTIVITY AND RECREATION CENTER)**

**ADDRESS: 1701 W. ASH ST. COLUMBIA, MO. 65203**

**TIME: 7:00A.M.-3:00P.M.**

**Tournament format:**

1. USAPA rules and regulations will be observed.
2. Women and Men Doubles. NOT based on skill level or age just a fun tournament for charity.
3. Round Robin style tournament. First to 11 points – 3 game guarantee.
4. All games will be on the "Honor System". No referees will be provided.
5. Each partner must submit his/her own registration form.
6. Tournament fee: \$20.00 dollars per person.
7. Medals awarded for 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> place.

**ALL PROCEEDS GO TO ST. JUDE CHILDREN'S RESEARCH HOSPITAL**

Please complete and print below Registration form and mail it along with your check payable to:

**GAMMA ETA** TO: Beth Weinsting  
4000 Brentwood Drive  
Columbia, Mo. 65202

**ONLY PAID TEAMS WILL BE IN TOURNAMENT**

**REGISTRATION DEADLINE: OCTOBER 30, 2019**

Questions; Please e-mail Lynne Hedrick at: [Lynne\\_hedrick@yahoo.com](mailto:Lynne_hedrick@yahoo.com)

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**PICKLEBALL TOURNAMENT REGISTRATION FORM**

NAME: \_\_\_\_\_ GENDER: M/F \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE #: ( ) \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE#: ( ) \_\_\_\_\_

WOMEN'S DOUBLES: ( ) PARTNER'S NAME: \_\_\_\_\_ PHONE #: ( ) \_\_\_\_\_

Time of games: TBA after registration deadline

MEN'S DOUBLES: ( ) PARTNER'S NAME: \_\_\_\_\_ PHONE #: ( ) \_\_\_\_\_

Time of games: TBA after registration deadline

RELEASE FORM (Please read, sign and date)

*I understand and acknowledge that participating in the event involves known and unanticipated risk which could result in physical or emotional injury, paralysis or permanent disability, death or property damage. I hereby, for myself, executors, my heirs and administrators wave and release any and all rights and claims for damages I may have for any and all injuries which may be suffered by me in connection with my participation in the pickleball tournament fundraiser and release the tournament sponsors, volunteers asked to conduct the tournament from any such claims.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_