## New Richmond "Pickleball in the Park" Tournament - Registration Form

-	Fri. July 13, 2018 – Random Doubles Points Tournament; Sat. July 14, 2018 – Doubles Tournaments			
Time:	8:00 a.m. check-in both days; play to begin at 8:30 a.m. both days.			
Events:	Random Doubles Points ("RDP" open to men and women); Women's Doubles;Men's Doubles completed and signed registration form and payment must be received by Fri. June 29, 2018.			
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Entry Fees:	\$20 for the first event and \$10 for each additional event. Please make checks payable to Kathy Stanke and mail to Kathy Stanke, 1773 George Norman Drive, New Richmond, WI 54017.			
Location:	Tournament will be held at Mary Park, New Richmond, WI			
Format:	RDP Tournament is "round robin" with rotating partners based on numbers drawn at check-in. Winner			
	determined by total points after 7 rounds of play. Doubles Tournaments are 4 team "round robin" (guaranteed 3 games) with any two team tie broken by championship game and any three team tie broken by total W-L			
	point different	ial. No refs-USAPA/IFP ru	ules to be followed. U	SAPA approved outside balls provided.
Cancellation/	1. 1	Contract and the contract		and the terror and the telephone and the terror
Refund Policy:	In the event of inclement weather or unforeseen circumstances, the tournament is subject to cancellation by the Tournament Directors and fees paid will be refunded less \$10 towards tee shirt cost.			
Name:				
	Last		First	<del></del>
Age/Gender:	Age - Must be at least 21 years old to participate. <b>Gender</b> - (M or F):			
Address:				
	Street	City	State	Zip
Phone #:				
Partner's Name for Doubles (if applicable): (Partner must register separately)				
Total Money Enclosed With Registration: \$				
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RELEASE, PERMISSION, AND INDEMNITY AGREEMENT				
<b>Release &amp; Waiver:</b> As a participant in the "Pickleball in the Park" Tournament (hereafter "Tournament"), I, for myself, my heirs or assigns, <b>release from liability and waive any claims</b> against the Tournament Directors (Randall and/or Kathryn Stanke), City of New Richmond, New Richmond Chamber of Commerce, and any other persons, organizations or entities associated in any way with this Tournament, that may arise from personal injuries, accidents, illnesses, death, and/or property damage or loss related to my participation in the Tournament.				
of the care take as bruises, spra and concussion understand, ar	en to avoid injur nins and dehydra ns; and, 3) catast nd appreciate th	ies. The specific risks var ation; 2) major injuries su crophic injuries such as pa	y, but include and are ch as eye injuries, join aralysis and death. <b>I h</b> a	herent risks that cannot be eliminated regardless not necessarily limited to: 1) minor injuries such it, bone or back injuries, heat stroke, heart attacks, ave read the previous paragraphs and I know, g pickleball. I assert that my participation is
Stanke), City of associated in a	New Richmond ny way with this	, New Richmond Chambe	er of Commerce, and a rom any and all claims	ournament Directors (Randall and/or Kathryn iny other persons, organizations, or entities s, actions, suits, costs, expenses, damages and the Tournament.
Signature of Pa	rticinant	Print Name o	of Participant	 Date