Grand Traverse Bay YMCA Great Lakes Open
USAPA Tier 3 Sanctioned Indoor Pickleball Tournament

Dates: Saturday September 20th, 2014
      Sunday, September 21st, 2014

Deadline: September 5, 2014

Where: Grand Traverse Bay YMCA Indoor Tournament
       3000 Racquet Club Drive
       Traverse City, MI  49684

Cost: $30.00 - For Single Event
      $40.00 - For Multiple Events
      $5.00 discount for USAPA members (please provide membership number)

Send entry form and check to:  Grand Traverse Bay YMCA
                              ATTN: Barb Beckett
                              3000 Racquet Club Drive
                              Traverse City, MI  49684

Make Check Payable to:  Grand Traverse Bay YMCA

Tournament Director:  Gary Ford: ford@traverselaw.com  Phone: 231-645-3622

This is a Tier 3 Tournament sanctioned by the USAPA. The venue has 10 courts and second-floor seating
for spectators. Discounted hotel options for the tournament dates are available at Cambria Suites, Comfort Inn, Best Western, Restwood Motel and Econo Lodge, all of Traverse City. For more specifics, go to tcpickle.com, "events" tab.

Adult Doubles Brackets will include Men’s, Women’s and Mixed, ages 19+; 35+; 50+; 60-64; 65-69; 70+; and
5.0. Age is determined as of December 31, 2014. There will also be Men’s and Women’s open singles.
5.0 and the Singles brackets will play with the Dura ball; all other brackets will use the Jugg ball.

The Adult Doubles Bracket is determined by the age of the younger partner. All adult players, regardless of
age, are welcome to play in the 5.0 bracket if desired. Adults may enter once for doubles, once for mixed
doubles, and once for singles. We reserve the right to eliminate or combine brackets where necessary.

This will be a double-elimination tournament, but we reserve the right to alter the format depending on the
eventual number of registrants. Registration will be limited to 175 participants. Early registration is encouraged to secure participation.

There will be snacks and beverages provided during the tournament, included with your registration fee.
There will also be sandwiches and other snacks provided by Cuppa Joe for purchase during the event. A table where you will be able to purchase pickleball accessories will be available.

The registration form is on the next page. You can register for event[s] in any of the following ways:

1. Register on-line at www.pickleballtournaments.com. This is the preferred method.
2. Complete the registration form manually. Print the registration form, fill it out manually, sign the waiver and mail it with your payment to the address below. Mail only the registration form - you do not need to mail the tournament information.

Be sure to include your e-mail address or telephone number on the registration form so the tournament directors can notify you of tournament news, partner information, etc.

Send entry form and check to:  GT Bay YMCA, 3000 Racquet Club Drive, Traverse City, MI  49684
                              ATTN: Barb Beckett

For the latest tournament information and updates, go to the Traverse Area Pickleball Association’s website at:  Tcpickle.com.
THIRD ANNUAL GREAT LAKES OPEN
PICKLEBALL TOURNAMENT
September 20-21, 2014
REGISTRATION FORM - Please Print

First Name: ___________________ Last Name: ___________________ USAPA Number: ____________
Address: _____________________ City: ______________ State: ____ Zip: _______
Phone: _______________________ E-mail address: __________________________
Emergency Contact (Name and Phone Number) ___________________________________________
DOB: _______________ (18 years minimum to enter) Gender: (Circle) Male Female

SKILL LEVEL
Circle your level: 2.5 3.0 3.5 4.0 4.5 5.0

EVENTS  (Circle or mark events)

□ Mixed Doubles - Sat. 9/20: 19+; 35+; 50+; 60-64; 65-69; 70+; 5.0
Partner’s Name: _________________________________________ or Need a Partner

□ Men’s Singles - Sat. 9/20: 19+; 35+; 50+; 60-64; 65-69; 70+; 5.0
Partner’s Name: _________________________________________ or Need a Partner

□ Women’s Singles - Sat. 9/20: 19+; 35+; 50+; 60-64; 65-69; 70+; 5.0
Partner’s Name: _________________________________________ or Need a Partner

□ Women’s Doubles - Sun. 9/21: 19+; 35+; 50+; 60-64; 65-69; 70+; 5.0
Partner’s Name: _________________________________________ or Need a Partner

□ Men’s Doubles - Sun. 9/21: 19+; 35+; 50+; 60-64; 65-69; 70+; 5.0
Partner’s Name: _________________________________________ or Need a Partner

LIABILITY WAIVER
I, __________________________
Name (Please Print)
Home address: ____________________________
Street City State Zip
acknowledge that I am aware that certain risks are or may be associated with activities sponsored by the Grand Traverse Bay YMCA, and I personally assume all such risks for the participation of myself in any activities in which I take part. I assume full responsibility to become educated regarding the proper and safe use of any equipment associated with the activities in which I am involved, and the responsibility to abide by all safety rules promulgated by the Grand Traverse Bay YMCA in relation to said activities. I likewise assume full responsibility to obtain medical clearance from my physician to participate in the activities offered by the Grand Traverse Bay YMCA. In consideration of the permission granted to me by the Grand Traverse Bay YMCA to participate in the activities it sponsors, I hereby release the Grand Traverse Bay YMCA and their agents, consultants or employees from all actions, causes of action, damages, claims or demands which I or my heirs, executors or assigns may have against these entities/persons for all injuries or property loss or damage which I may incur by participating in said activities.

I have read this informed consent/release of claims and understand its terms. I execute it voluntarily and with full knowledge of its significance.

In witness whereof, I have executed this release this ____ day of _______________ in the year 2014.

____________________________________
Adult Guest Signature