2nd Annual Pickled Peach Tournament
Outdoor Pickleball Tournament November 13, 2015
Bishop Park, Athens GA

Dates:  
Friday November 13 (12PM Start)  Singles Age
Saturday November 14 (9AM Start)  Mixed doubles
Sunday November 15 (9AM Start)  Women's Doubles and Men's Doubles
Rain Date Monday and Tuesday November 16 and 17

Registration deadline: Monday October 26th.
Where: Julius F. Bishop Park, 705 Sunset Dr. Athens, GA 30606
(706) 613-3589
Cost: $45.00 - For up to three events

The brackets will be structured as a double elimination tournament.
There will be snacks and beverages provided during the tournament.

You can register on-line using credit cards or Pay Pal, or you can print the registration form and mail it with your check to:
Walter Straus
ATTN: Tournament Forms
P.O. Box 368
Madison, GA  30650

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

Questions: Contact  PickledPeach@mail.com
2nd ANNUAL PICKLED PEACH PICKLEBALL TOURNAMENT
November 13, 14 and 15, 2015

REGISTRATION FORM:

Last Name: ___________________________ First Name: ___________________________
Street Address: ________________________________________________________________
Address: City: State: Zip: _________________________________________________________
USAPA Number: _________________ T-Shirt Size: __________
Phone: ___________________________ E-mail address: __________________________________
Emergency Contact (Name and Phone Number): _________________________________________
DOB: _______________ Age (as of 12/31/2015): __________ Gender: (Circle) Male Female
Entry Fee (for up to 3 events): $45

SKILL LEVEL
Circle your level: 2.5  3.0  3.5  4.0  4.5  5.0
Age Categories are: 19+, 50+, 55+, 60+, 65+, 70+, and 75+. Any bracket with insufficient players will be
combined with other brackets. However medals will be given for each bracket.

EVENTS (Mark events you will participate in)
Friday: Singles AGE □ starting at 12 PM: S
Saturday: Mixed Doubles AGE □ starting at 9 AM: MXD
Sunday: Single Sex Doubles AGE □ starting at 9AM: WD and MD
Doubles Partner’s Name: ________________________  Partner’s Email: ______________________

Mixed Doubles Partner’s Name: ______________________  Partner’s Email: ______________________

LIABILITY WAIVER

I, ______________________________________________________ Name (Please Print)

Home address: ____________________________________________________________________________

Street - City - State - Zip

I acknowledge that I am aware that certain risks are or may be associated with activities sponsored by the Athens Area Pickleball Association, 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 Athens Area Pickleball Association and USAPA 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 Athens Area Pickleball Association. In consideration of the permission granted to me by the Athens Area Pickleball Association to participate in the activities it sponsors, I hereby release the Athens Area Pickleball Association and all venues associated with said activities and their agents, consultants, members 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 2015.

_______________________________________________________

Adult Competitor Signature  and  Printed Name