3rd Annual
Jane Carey Memorial
Pickleball Tournament

Saturday, July 15, 2017 — Men’s & Women’s Doubles
Sunday, July 16, 2017 — Mixed (coed) Doubles

Registration Deadline: June 16th

Registration Information
You must have a partner to register. If you are a single player looking for a partner, you may sign up as a free agent at www.teamsideline.com/pleasanton. There are no guarantees a partner will be found for you.

Age: 18+
Date: July 15 & 16, 2017
Tournament Start Time: 8:00am
Team Registration Fee: $30 (per day - includes t-shirt)
Location: Pleasanton Middle School Gym, 5001 Case Ave

Saturday Men’s | Saturday Women’s | Sunday Mixed (coed)
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Novice | Novice | 3071
Intermediate | Intermediate | 3072
Advance | Advance | 3073

Level of Play Ranking: Novice = 1.0-2.5, Intermediate = 3.0-3.5, and Advanced = 4.0-5.0

If you are unsure of your level of play, please refer to the following link for guidance:
http://ipickleball.org/ratings/IFP_ratings_descriptions.html

Tournament Information
Brackets will be determined by skill level. Should there be enough teams within a certain age range, then an age bracket will be created within that division of play (i.e. Men’s 45-50 intermediate). If age brackets are implemented, the younger partner’s age will be used to determine which bracket the team will play in.

- You may only register for one division of play each day
- Indoor play with possible overflow games played outdoors
- Participants will be required to sign a waiver upon arrival

- 3 match guarantee
- USAPA tournament rules

Mail-In Registration Form
Course Code: ___________     First Name: _____________________________________    Last Name: ______________________________
Gender:______     Phone: _____________________________     Email: __________________________________________      Address: __________________
City/State: ___________________  Partner’s Name (First/Last):_________________________   Partner’s Age:___________
I, agree and consent to my participation in City of Pleasanton’s Jane Carey Memorial Pickleball Tournament.
Print Name: _____________________________________________     Signature: ____________________________________________     Date: ___________

Mail this form to: Community Services Department: ATTN: Pickleball Tournament, P.O. Box 520, Pleasanton, CA 94566
For additional information, please contact Nilo Velazquez at nvelazquez@cityofpleasantonca.gov or (925) 931-3439