



Saturday, September 22, 2018

(Rain Date: Sunday)

\$50 per team

MUST HAVE A PARTNER TO REGISTER
(Max 16 Team / Per Division)

Registration Deadline:
Friday, 9/7/18
By the end of the work day Friday at
4:30 pm

Check-in: 8:00 to 8:30 am
Start Time: 8:30 am

Mixed – Doubles / Round Robin

Skill Level: Recreational

3 Age Divisions: () 49 and under () 50-59 () 60 and up (All divisions will be based on number of teams registered)

Player 1: _____ age as of 9/22/18

Name: _____

Email: _____

Address: _____

Phone: _____

City: _____ State _____ Zip: _____

Male Female Player 1 T-Shirt Size: _____

Player 2: _____ age as of 9/22/18

Name: _____

Email: _____

Address: _____

Phone: _____

City: _____ State _____ Zip: _____

Male Female Player 2 T-Shirt Size: _____

T-Shirts: Please indicate size above (Adult: SM, MD, LG, XL, XXL) ~ T-shirts will be available at Check-in ~

Release Waiver: No refunds will be given for weather or cancellation. Photos taken for publicity purposes may be used on the Town Web Site, our Facebook pages, in local newspapers or in our brochures, unless otherwise requested by the participant. As the participant, I accept full responsibility for any and all injuries which may arise out of participation in the tournament, being registered for tournament I hereby release the Town of Lysander, and its agents and/or employees from any claims of any nature whatsoever arising out of the participation in this tournament. I understand that there is no medical insurance for the participants of this tournament. I the undersigned have read, understand, and agree to the policies listed on this page.

Player 1 Signature: _____ Date: _____

Player 2 Signature: _____ Date: _____

Make Checks Payable to: **Town of Lysander**

Mail to: *Lysander Parks & Recreation*
8220 Loop Rd
Baldwinsville, NY 13027

Tournament Location: **Lysander Town Park**
8439 Smokey Hollow Rd
Baldwinsville, NY 13027

For more information please contact Tony Burkinshaw 315-635-5999.

~~~~~ OFFICE USE ONLY ~~~~~

Date Received: \_\_\_\_\_ Received \$ \_\_\_\_\_

Check: \_\_\_\_\_ Cash: \_\_\_\_\_ CC: \_\_\_\_\_ Receipt # \_\_\_\_\_