OCTTA Weekend Team League

(Schedule expected : September 12 - October 11, 2026)

Total Cash Prizes : $3,550

The Registration is conducted exclusively through www.omnipong.com
Venue Address : Orange County Table Tennis Academy
18071 Mount Washington, Fountain Valley, CA 92708

Equipment:
- Butterfly Centrefold 25
- Nittaku Premium 3* 40+
- All Courts will be Floored

Tournament Officials:
- Tournament Director: Dr Le (909) 223 3419
- Tournament Referee: Joe Tran

Team Entry Form

League Season:_____

League Dates:_____

Venue: _____

Team Entry Deadline:_____

Team Entry Fee:$_____

Team Name:_____

Team Captain:_____

Division:

- Community Division - Under 2800. Maximum rating for one player is 2000
- Challenger Division - Under 3400. Maximum rating for one player is 2200
- Competitive Division - Under 4000. Maximum rating for one player is 2400
- Premier Division - Under 4800. Maximum rating for one player is 2700

Please place our team in the appropriate division

Team Uniform / Color, if applicable:_____

Element	Setup
Season length	4-6 weekends
Match day	Saturday and Sunday evening
Team size	2 players, with an optional third substitute
Divisions	Rating-based divisions, Under 2800, Under 3400, Under 4000, Under 4800
Matches per team day	2–3 team matches
Team match format	Singles, singles, doubles, singles, Golden Game tiebreaker if needed
Scoring	Best-of-five games to 11; Golden Game is one deciding game to 5
Playoffs	Top 4 or top 6 teams in each division qualify

Match No.	Format
1	Player A vs. Player X
2	Player B vs. Player Y
3	Doubles
4	Player A vs. Player Y
5	Player B vs. Player X
Tiebreaker	Golden Game: coach or captain selects one player from each team

Player 1 — Team Captain

Full Name:_____

Date of Birth:_____

Phone Number:_____

Email Address:_____

USATT Membership Number, if applicable:_____

USATT Rating, if applicable:_____

Club Rating or Estimated Playing Level:_____

Emergency Contact Name:_____

Emergency Contact Phone:_____

Player 2

Full Name:_____

Date of Birth:_____

Phone Number:_____

Email Address:_____

USATT Membership Number, if applicable:_____

USATT Rating, if applicable:_____

Club Rating or Estimated Playing Level:_____

Emergency Contact Name:_____

Emergency Contact Phone:_____

Optional Substitute Player

A substitute may play only with league approval and must meet the division's rating and eligibility requirements.

Full Name:_____

Phone Number:_____

Email Address:_____

USATT Membership Number, if applicable:_____

USATT Rating, if applicable:_____

Club Rating or Estimated Playing Level:_____

Availability and Scheduling

Preferred Match Day:

- Saturday
- Sunday
- Either Saturday or Sunday

Preferred Time Block:

- Morning
- Afternoon

League Format Acknowledgment

By entering, our team understands and agrees to the following:

- Teams consist of two primary players, with one optional approved substitute.
- Divisions are assigned based on rating, playing level, and league director approval.
- Team matches may include singles and doubles matches.
- A tied team match may be decided by a Golden Game, consisting of one deciding game to 11 points.
- Players must arrive on time and be ready to begin at their assigned match time.
- The league director may adjust divisions, schedules, or team placement to maintain competitive balance.
- League standings may use team-match wins, individual-match differential, game differential, and head-to-head results as tiebreakers.
- Players must follow venue rules, sportsmanship standards, and referee decisions.
- Entry fees are generally nonrefundable once the schedule has been published, except when approved by league management.

Media Release

Please select one:

- I authorize the league and venue to use photographs and video of me for league promotion, social media, and event recaps.
- I do not authorize the use of identifiable photographs or videos of me for promotional purposes.

Waiver and Signature

I understand that table tennis activities involve physical exertion and the possibility of injury. I voluntarily participate in the OCTTA Weekend Table Tennis Team League and accept responsibility for my own health, safety, equipment, and conduct. I release the league organizer, venue, staff, volunteers, sponsors, and affiliated parties from claims arising from ordinary participation in league activities, except where prohibited by law.

I confirm that the information provided on this form is accurate. I agree to follow all league rules and accept the league director's decisions regarding eligibility, scheduling, ratings, and competition administration.

Team Captain Signature:_____

Date: _____

Player 2 Signature:_____

Date: _____

Substitute Player Signature, if applicable:_____

Date: _____

Division	1st Place	2nd Place	3rd Place	4th Place	Total Prize Pool
U2800 Division	$200	$100	$50	$50	$400
U3200 Division	$300	$150	$100	$100	$650
U4000 Division	$500	$200	$100	$100	$900
U4800 Division	$800	$400	$200	$200	$1600

Division	Pilot Team Fee	Approx. Cost per Player	Cash Prize Pool
U2800 Division	$120	$60	$320
U3200 Division	$160	$80	$400
U4000 Division	$200	$100	$800

U4800 Division	$240	$120	$1100

Add-On Fees

Item	Suggested Fee
Early-bird discount (first 10 Teams)	$20 off per team
Late registration	$25 extra per team
Approved substitute player	$20 for the season
Individual “free-agent” registration	Same player share as the team division fee
Team name or uniform change after schedule release	$10 administrative fee
Make-up match, when approved	$20 per team
Returned payment or failed charge	$20

Registration-Based Prize Formula

To protect the league budget, state that prize money is based on the number of fully paid teams in each division.

Paid Teams in Division	Recommended Prize Payout
4–5 teams	Champion only
6–7 teams	1st and 2nd place
8–11 teams	1st, 2nd, 3rd, and 4th place
12+ teams	Full advertised payout, with possible bonus prizes

Payment Information

Payment Method:

- Cash
- Credit / Debit Card
- Zelle: letuandai@yahoo.com
- Venmo : @Tuan-Le-279

Amount Paid:$_____

Date Paid: _____

Payment Confirmation or Transaction ID:_____

Received By:_____

League Staff Use Only

Item	Details
Registration received	_____
Payment verified	_____
Division assigned	_____
Team rating total	_____
Substitute approved	Yes / No
Waiver completed	Yes / No
Schedule sent	Yes / No
Notes	_____