



Paddle Palace Club Fall Open

Sat. & Sun. October 6th and 7th

USATT Sanctioned Tournament

LOCATION: Paddle Palace Club - 12230 SW Main St. Tigard, OR 97223

SPONSORS: Paddle Palace Table Tennis – www.paddlepalace.com

DIRECTOR: Jay Crystal, jay@paddlepalace.com

LOGISTICS: Christian Lillieroos, christian@paddlepalace.com

ELIGIBILITY: Must be current member of the USATT or other ITTF affiliated association OR purchase a 1-time Tournament Pass. USATT membership or Tournament passes can be purchased with your tournament entry. We will use the current USATT rating system to conduct all draws. UNRATED PLAYERS cannot play in rated doubles events or advance out of rated round-robin events.

ENTRY DEADLINE: All entries must be received by Friday, **October 5, 2017**. Late entries, phone entries and walk-ins will only be accepted if space is available and at the director's discretion.

REGULATIONS: All USATT regulations apply and USATT approved equipment are to be used. Please refer to the USATT dress code guidelines for clothing/attire.

VENUE/EQUIPMENT: 10 Donic Waldner Premium 30 tables with Donic Stress nets, Nittaku 3-Star Premium 40+ balls made in Japan (white), ITTF-approved red sports flooring and LED lighting on all courts

CONDUCT: Follow the sequence of play on the score sheet so you will be aware when you are next up. Please keep your warm-ups limited to two minutes and write down the scores after each game. Following the completion of a RR or a SE match, bring the completed score sheet with the clip board, balls, and pencils used to the control desk.

FOOD/PARKING: Paddle Palace Club is located in downtown Tigard on Main Street, 20 minutes from downtown Portland. The venue location offers several restaurants within walking distance and free street parking, in addition to the venue's 35-space parking lot.

LODGING: Hilton Garden Inn, 14850 Kruse Oaks Dr, Lake Oswego, OR 97035 [Phone: \(503\) 684-8900](tel:5036848900)
Call and mention Paddle Palace for discounts on rooms.

ENTRY: Entrants may enter multiple events. Events with insufficient entries may be cancelled with entry fees fully refunded.

EVENT REPORTING: Please report 30 minutes prior to your event

USATT MEMBERSHIP: Current USATT or other ITTC affiliate membership required of all participants. Adult 1 yr.- \$75; Junior 1 yr.-\$45; College 1 yr.- \$45; Adult 3 yr.-\$210; Family 1 yr.-\$150; Pass \$20.

Saturday Oct. 6th

Events	Time	Fee	Prizes
U4200 Doubles RR	9am	\$20 per player	1st Place - \$100 2nd Place - \$50
U2400 Doubles RR	9:00am	\$20 per player	1st Place - Trophy 2nd Place - Trophy
U1700 RR	10:30am	\$20	1st Place - \$100 2nd Place - \$50
Open Singles RR	12:30pm	\$20	1st Place - \$100 2nd Place - \$50
U1900 RR	2:30pm	\$20	1st Place - \$100 2nd Place - \$50
U1500 RR	4:30pm	\$20	1st Place - \$100 2nd Place - \$50
U1100 RR	6:00pm	\$20	1st Place - Trophy 2nd Place - Trophy

Sunday Oct. 7th

Events	Time	Fee	Prizes
U3200 Doubles RR	9am	\$20 per player	1st Place - \$100 2nd Place - \$50
U1600 RR	10:30am	\$20	1st Place - \$100 2nd Place - \$50
U2100 RR	12:30pm	\$20	1st Place - \$100 2nd Place - \$50
OVER 40 RR	2:30pm	\$20	1st Place – Trophy 2nd Place - Trophy
Juniors RR	2:30pm	\$20	1st Place – Trophy 2nd Place – Trophy
U1800 RR	4:30pm	\$20	1st Place - \$100 2nd Place - \$50
U1300 RR	6:00pm	\$20	1st Place – Trophy 2nd Place - Trophy

2018 PPC Fall Open Entry Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone#: _____ Email: _____

USATT Rating: _____ USATT Membership #: _____ Exp. Date: _____

✓ Events(s) you will be participating in

Saturday Oct. 6th

- U4200 Doubles (9am/\$20 each)
- U2400 Doubles (9am/\$20 each)
- U1700 RR (10:30am/\$20)
- Open Singles RR (12:30am/\$20)
- U1900 RR (2:30pm/\$20)
- U1500 RR (4:30pm/\$20)
- U1100 RR (6:00pm/\$20)

Sunday Oct. 7th

- U3200 Doubles (9am/\$20 each)
- U1600 RR (10:30am/\$20)
- U2100 RR (12:30pm/\$20)
- OVER 40 RR (2:30pm/\$20)
- Juniors RR (2:30pm/\$20)
- U1800 (4:30pm/\$20)
- U1300 (6:00pm/\$20)

Name of Doubles Partner
U4200: _____

Name of Doubles Partner
U2400: _____

Name of Doubles Partner
U3200: _____

Total Event Fees \$ _____

USATT Membership fee (if required)
\$ _____

Total Fees Owed \$ _____

Please mail your entry with full payment
(check or money order
payable to Paddle Palace Club) to:

**Paddle Palace Club c/o Jay Crystal
12230 SW Main St.
Tigard, OR 97223**

Signature _____ Date _____ (Parent or
guardian signature required if participant is a minor)

USA TABLE TENNIS

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Tournament: _____ **Date:** _____

Tournament Director: _____ **Club Name:** _____

1. IN CONSIDERATION of being permitted to participate in any way in USA Table Tennis sanctioned events, I and/or my minor child, our personal representatives, assigns, heirs, and next of kin:

2. ACKNOWLEDGE, agree, and represent that I and/or my minor understand the nature of Table Tennis Activities and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such Activity. I further agree that if at any time I believe conditions or equipment to be unsafe, I and/or my minor child will immediately discontinue further participation in the Activity.

3. FULLY UNDERSTAND that (a) TABLE TENNIS ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH, HARASSMENT, EXPOSURE TO INAPPROPRIATE CONDUCT AND LANGUAGE ("RISKS"); (b) these Risks and dangers may be caused by me and/or my child's own actions, or inaction, or the actions or inaction of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SEVERE SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I and/or my minor child incur as a result of my participation in the Activity.

4. HEREBY ACCEPT AND ASSUME ALL SUCH RISKS, KNOWN AND UNKNOWN, AND ASSUME ALL RESPONSIBILITY FOR THE LOSSES, COSTS, AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS, OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW;

5. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE USA TABLE TENNIS, their respective administrators, directors, agents, officers, officials, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I and/or my minor child, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

6. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Signature of Participant: _____ Print Name: _____ Date: _____

Parent/Legal Guardian Signature _____ Print Name: _____ Date: _____
(if under 18):