



2022 Oregon State Championships

Saturday November 12th, 2022

USATT–Sanctioned Tournament

LOCATION: Paddle Palace Club 12230 SW Main St, Tigard, OR 97223. Phone# 503-549-6292.

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

DIRECTOR: Ryan Hoarfrost, club@paddlepalace.com

UMPIRE: Jay Crystal (CU)

ELIGIBILITY: **Open only to Oregon residents**

Must be a current member of the USATT or other ITTF affiliated association. USATT membership can be purchased with your tournament entry. We will use the current USATT rating system to conduct all draws.

ENTRY DEADLINE: All entries must be received by **November 11th, 2022**. Late entries, phone entries and walk-ins will only be accepted if space is available and at the tournament director's discretion.

EVENT FORMAT: Events will be round robin format with a single elimination playoff. The top 2 players from each RR group will advance to single elimination. All matches are best of 5 games to 11 points.

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: 9 STIGA Optimum 30 tables with STIGA Premium VM 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 scoresheet to the control desk.

FOOD/PARKING: Paddle Palace Club is located in downtown Tigard on Main Street, 20 minutes from downtown Portland. The venue offers several restaurants within walking distance and free parking.

USATT MEMBERSHIP: Current USATT or other ITTF affiliate membership required of all participants. Basic Membership: \$25/year, Pro Membership: \$75/year.

Saturday Nov. 12th

Events	Time	Fee	Prizes
Open Singles RR	10:00am	\$40	1 st Place - \$250 2 nd Place - \$150 3 rd /4 th Place - \$75/\$75 *1 st and 2 nd place has names etched on the prestigious OR State Champs Trophy
Over 50 RR	1:00pm	\$20	1 st /2 nd Place - Certificate
Juniors (Under 18) RR	1:00pm	\$20	1 st /2 nd Place - Certificate
Women's Singles RR	4:00pm	\$20	1 st Place \$100 2 nd Place \$50

2022 Oregon State Championships Entry Form

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone#: _____

Email: _____

USATT Rating: _____

USATT Membership #: _____

Exp. Date: _____

Club affiliation: _____

✓ **Events(s) you will be participating in:**

Saturday:

- Open Singles (10:00am/\$40)
- Over 50 RR (1:00pm/\$20)
- Juniors RR (1:00pm/\$20)
- Women's RR (4:00pm/\$20)

Total Event Fees: \$ _____

USATT Membership fee
(if required): \$ _____

Optional donation for USATT
National Team Program: \$ _____

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 Dan Hoarfrost
12230 SW Main St.
Tigard, OR 97223**

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):