

WESTCHESTER 2025 FEB. OPEN

4-star USATT-Sanctioned Tournament

February 22-23, 2025

Sponsoring Club: Westchester Table Tennis Center
Venue: Westchester TTC, 175 Tompkins Ave., Pleasantville, NY 10570. Tel: (914) 741-0738
Tournament Committee: Robert Roberts (Director), Rawle Alleyne, and Will Shortz
Referee/Rank: Daniel Sorial (CR)Jiaming Zheng/CU
Equipment: USATT-approved Double Happiness

tables & nets; White GEWO Select Pro 40+ balls. Rubberized flooring on gymnasium wood
Directions: [by car:] Two minutes from exits 28 and 29 of the Saw Mill River Parkway. [by train:] 3 1/2 blocks from the Pleasantville station on MetroNorth. Full directions with map appear at www.westchestertabletennis.com/directions

NO.	EVENT NAME	DAY	TIME	FEE	1ST	2ND	3RD/4TH	5TH-8TH	LIMIT
1	Open Singles	SUN	2:00 PM	\$95	\$3,000	\$1,000	\$350	\$150	48
2	Under 2500	SUN	10:00 AM	\$50	\$600	\$300	\$150	-	48
3	Under 2350	SUN	4:00 PM	\$40	\$400	\$150	\$75	-	44
4	Under 2200	SUN	12:00 PM	\$40	\$300	\$150	\$60	-	48
5	Under 2050	SUN	2:00 PM	\$35	\$250	\$125	-	-	44
6	Under 2000	SAT	11:30 AM	\$35	\$200	\$75	-	-	40
7	Under 1900	SUN	10:00 AM	\$35	\$150	\$75	-	-	40
8	Under 1750	SAT	3:30 PM	\$30	\$125	\$50	-	-	40
9	Under 1600	SAT	1:30 PM	\$25	\$50	T	-	-	40
10	Under 1450	SAT	11:30 AM	\$25	\$50	T	-	-	32
11	Under 1300	SAT	9:30 AM	\$25	\$50	T	-	-	28
12	Under 1150	SAT	3:30 PM	\$25	\$50	T	-	-	28
13	Under 1000	SAT	1:30 PM	\$25	\$50	T	-	-	28
14	Under 850	SAT	11:30 AM	\$25	\$50	T	-	-	28
15	12 & Under	SAT	9:30 AM	\$25	\$50	T	-	-	20
16	Over 40 & U1800	SAT	9:30 AM	\$30	\$200	\$75	-	-	24
17	Handicap*	SAT	1:00 PM	\$25	\$200	\$75	-	-	28
18	Doubles U3200**	SAT	3:30 PM	\$20**	\$200	\$80	-	-	16

T = Trophy. All events start with round robins followed by single-elimination playoffs. Match = 3 out of 5 games except as noted. The tournament committee reserves the right to change the draw limit for any event depending on the number of registrants. No prize money will be awarded for defaults, splits or unfinished matches. USATT dress code is enforced. Do not wear white clothing.

ENTRY DEADLINE: Postal mail entries must be received by Feb. 21, 2025. Late entries will be accepted, by phone or at the door, space permitting.

ENTRY POLICY/RATINGS: USATT ratings of Feb. 21, 2025, will be used. No player may participate in two events that start at the same time or more than three events on the same day.

ELIGIBILITY: USATT membership is required. Members may join or renew at the door. For age events, players must be in their age category as of the tournament date. The tournament committee may estimate ratings for unrated players, who are then eligible to advance to the playoffs. Two players advance from each RR, except for U-2350.

DEFAULT POLICY: USATT rules apply. Players not signed in by an event's starting time will be defaulted.

REFUNDS: Unused fees will be refunded.

(*) **HANDICAP:** Higher-rated player handicapped 1 point for every 75-point rating advantage over lower-rated player. Maximum 7 points per game. See the posted sheet.

(**) **DOUBLES U3200:** The players' combined ratings must be under 3200. Entry fee is per person. Match = best of 3.

Westchester 2025 February Open Table Tennis Tournament

Circle the event(s) you wish to enter:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Total Event Fees \$ _____

Registration Fee \$ 20

USATT Fee \$ _____
 Basic membership \$25; or Pro membership \$75 (each 1 year)
 Not required for events #17 and #18

Optional donation to Table Tennis Team USA National Program \$ _____

TOTAL AMOUNT \$ _____

Payment (check/money order) may be sent to:
 Westchester Table Tennis Center, 175 Tompkins Ave., Pleasantville, NY 10570

You may self-register at StadiumTT.com

To register by email:

westchestertournament@gmail.com

By text: 347-219-1896 or 646-641-1219

Zelle payments to: 845-269-5583

PayPal payments to: westchestertt@gmail.com

Please include heading "February Open"

First Name _____ Last Name _____

USATT Member ID _____ Exp Date ____ / ____ / ____ New Member?

Rating _____ Telephone (____) _____ -

Email Address _____

Street Address _____

City _____ State _____ Zip _____

Date of Birth ____ / ____ / ____ Gender M / F / Other _____ Home Club _____

By my participation, I hereby relieve the sponsors: USATT, Westchester Table Tennis Center and tournament committee of any liabilities for injury to myself and/or property damage or loss. I agree to comply with all decisions of the tournament officials. I will abide by all USATT regulations.

I have read and agree to the USATT SafeSport Protocol (<http://www.westchestertabletennis.com/events.asp?id=178>)

Signature (Parent/Guardian if minor): _____ Date ____ / ____ / ____