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CHINESE DOUBLE TEN CELEBRATION TOURNAMENT
CIMARRON RECREATION CENTER 201 Red River Trail, Irving 75063
SEPTEMBER 27 (SATURDAY), 2025 (214) 240-5975 or email: dfwtt1@gmail.com

EVENTS		TENTATIVE STARTING TIMES	AWARDS		
			1ST	2ND	3RD
1.	75 & Over Singles	8:40 a.m.	T (Trophy)	T	T
2.	70 - 74 Singles	8:40 a.m.	T	T	T
3.	65 - 69 Singles	8:40 a.m.	T	T	T
4.	60 - 64 Singles	8:40 a.m.	T	T	T
5.	50 - 59 Singles	8:40 a.m.	T	T	T
6.	40 - 49 Singles	8:40 a.m.	T	T	T
7.	Women's Singles	8:40 a.m.	T	T	T
8.	20 - 39 Singles	8:40 a.m.	T	T	T
9.	14 - 19 Singles	8:40 a.m.	T	T	T
10.	12 - 13 Singles	8:40 a.m.	T	T	T
11.	10 - 11 Singles	8:40 a.m.	T	T	T
12.	8 - 9 Singles	8:40 a.m.	T	T	T
13.	Under 8 Singles	8:40 a.m.	T	T	T
14.	Open Doubles				
	Class A	11:40 a.m.	TT	TT	TT
	Class B	11:40 a.m.	TT	TT	TT
	Class C	11:40 a.m.	TT	TT	TT
	Class D	11:40 a.m.	TT	TT	TT
15.	Open Singles				
	Class A	1:40 p.m.	T	T	T
	Class B	1:40 p.m.	T	T	T
	Class C	1:40 p.m.	T	T	T
	Class D	1:40 p.m.	T	T	T

Format: All events will be round robin in the preliminaries followed by single elimination. Players who had rated over 1800 must enter the Class A event, Class B (over 1550), Class C (1550-1000), Class D (U-1000). Doubles classes will be decided on the higher-ranking player in the team. Class D doubles are for kids under 14 or women, and no player should be over 1000.

Entering 2 events at the same starting time is not allowed.

Official Tournament Balls: Double Fish 40+

Fees: \$20 for the first entered event and an additional \$5 for the second event entered.

Entry with check or Zelle must be postmarked by September 20. Late Fee is \$10. (Late Fee also applies to phone entries.)

Refunds only if events are canceled or filled.

Boxed Lunch: \$12: ☐ Chicken Masala or ☐ Lamb Masala or ☐ Paneer Masala (Vegetarian).

Tournament Director: Donna Chen.

Please make all entries & payments to: **DFWTT, 9436 Lake Court, Irving, TX, 75063.**

Please call **(214) 240-5975** if you have any other questions.

----- **ENTRY BLANK** -----

NAME: _____ **RATING:** _____

E-MAIL ADDRESS: _____ **Birth date:** ____/____/____

PHONE #: (H) _____, (C) _____

EVENTS ENTERED: Please circle events listed below:

1. O-75 **2.** 70-74 **3.** 65-69 **4.** 60-64 **5.** 50-59 **6.** 40-49 **7.** Women's **8.** 20-39 **9.** 14-19 **10.** 12 -13 **11.** 10 -11

12. 8-9 **13.** U-8 **14.** Open Singles - CLASS A or B or C or D

15. Open Doubles - CLASS A or B or C or D Doubles Partner _____

Lunch: _____ **Total fees:** _____

LIABILITY RELEASE:

I hereby release Cimarron Recreation Center and DFW Table Tennis from any claim or demand for any loss, damage or injury sustained to any person or property. I assume full responsibility and all risk for my participation in playing at this event.

Signature _____ (Parent or guardian if player is a minor)