

DOUBLES PICKLEBALL ROUND ROBIN

AGE:

18 & up

DATE:

Saturday, March 12

TIME:

8:00AM: Men's & Women's
Doubles

1:00PM: Mixed Doubles
Check-in will be 15 minutes
prior to your starting time.
Your starting time will be
available on Thursday,
March 10, after 3:00PM.
Contact Jeremy Staats to
obtain your starting time,
(815) 441-5911.

FEE:

\$20.00 per team

LOCATION:

Westwood Fitness & Sports
Center, 1900 Westwood
Drive, Sterling

ACTIVITY CODE:

5560

TOURNAMENT**DIRECTOR:**

Jeremy Staats
(815) 441-5911

REGISTRATION**DEADLINE:**

March 7



Play will consist of Men's Advanced Doubles, Men's Intermediate Doubles, Women's Advanced Doubles, Women's Intermediate Doubles, Advanced Mixed Doubles and Intermediate Mixed Doubles. If there are 10 or more teams in any division, we will split them into two separate round robin groups. During round robin play, each match will be one game played to 11, win by 2. Once pool play is complete, the two teams with the best records will play best of 3 games (to 11, win by 2) to determine the winner. The teams with the 3rd and 4th best records will play best of 3 games (to 11, win by 2) to determine the 3rd place winner. In the event of 10 or more entries, the players with the best record in each group will play to determine the winner. The players with the 2nd best record in each group will play for third. In the event of a tie after all round robin games have been played, the tiebreaker will be the head to head record. All games will be self officiated.

Balls will be provided

There will be an order of play posted at the tournament site. You will be responsible for knowing the start time of your games. You must be prepared to play 15 minutes before you are expected to play. You will have 2 warning calls if you are not present at the time of your match. 5 minutes after your match is called to the court is when you will be considered a forfeit. You can obtain your starting time by contacting the tournament director after 3:00PM on Thursday, March 10.

**STERLING PARK DISTRICT**

Westwood Fitness & Sports Center
PO Box 958 • 1900 Westwood Drive
Sterling, IL 61081
(815) 622-6201

www.sterlingparks.org   

REGISTRATION FORM

STEP 1 HOUSEHOLD INFORMATION (*Indicates a required field.)

Primary Head of Household Information

First Name*: _____ Middle Name: _____ Last Name*: _____

Street*: _____ City*: _____ State*: _____ Zip*: _____

At least one phone number is required. Home #: _____ Work #: _____

Cell #: _____ I agree to receive text messages. My cell phone provider is _____

E-mail Address*: _____ Gender*: Male Female Date of Birth*: _____

Secondary Head of Household Information

First Name*: _____ Middle Name: _____ Last Name*: _____

At least one phone number is required. Home #: _____ Work #: _____

Cell #: _____ I agree to receive text messages. My cell phone provider is _____

E-mail Address*: _____ Gender*: Male Female Date of Birth*: _____

STEP 2 SELECT PROGRAMS FOR EACH PARTICIPANT

Participant's First and Last Name*	M/F*	Birthdate*	Grade	School	Shirt Size**	Program	Activity Code	Fee
**Shirt is included with certain activities only. Refer to program description to see if applicable. If you are registering for a youth sports program, are you interested in being a volunteer coach? Yes / No I need a modification because of disability for this program. Yes / No								Total: \$ _____

STEP 3 SIGN THE WAIVER

The Sterling Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Sterling Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury, or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Despite careful and proper preparation, instruction, medical device, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity or program. Understandably, not all hazards and dangers can be foreseen. Participants must understand that certain risks, dangers, and injuries due to acts of God, inclement weather, slipping, falling, equipment failure, failure in supervision, premise defects, and all other circumstances inherent to recreational activities/programs exists. In this regard, it must be recognized that it is impossible for the Sterling Park District to guarantee absolute safety.

WAIVER & RELEASE OF ALL CLAIMS & ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Sterling Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Printed Name

Signature of Participant or Guardian (If participant is under 18)

Date

STEP 4 METHOD OF PAYMENT	STEP 5 SUBMIT THIS FORM	OFFICE USE ONLY
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Amount: \$ _____ Cash Check # _____

Credit Card #: _____

Visa Mastercard Expiration Date: _____

Card Holder (Print): _____

Authorized Signature: _____

Mail in, drop off or fax to a
Sterling Park District Office:

Duis Center PO Box 958 211 East St. Mary's Rd Sterling, IL 61081	Westwood PO Box 958 1900 Westwood Dr Sterling, IL 61081
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Registration Fax: (815) 622-6210

Date: _____

Initials: _____