

# CLEARWATER CLUB CHALLENGE

Hosted by the Sunrise Table Tennis Club and the City of Clearwater Parks and Recreation Dept.

**WHEN: Saturday, July 15, 2017**

**WHERE: The Long Center, 1501 N Belcher Rd, Clearwater, FL 33765**

**Tournament Questions: Carolyn (727) 557-7299**

## ENTRY FEES:

Adult Singles (includes Doubles entry): \$25

Junior Singles (Under 18; includes Doubles entry): \$10

Doubles Only: \$15

STTC Members receive a \$5.00 discount.

Singles Check in Time: 8:15 a.m.

Singles Start Time: 9:00 a.m.

RR-SE

Doubles Check in Time: 11:30 a.m.

Doubles Start Time: \*\*

RR

\*Players will be entered and seeded into the appropriate Class according to their rating or estimated rating.

\*\* Doubles will start right after Singles winds down. Make sure you sign up on the sheet at the front desk when you get there.

The Tournament committee reserves the right to cancel the tournament or modify the events or format based on the number of entries or other factors.

**If you do not have a USATT rating, please arrive by 8:15 am so an estimated rating can be determined.**

**For tournament questions call Carolyn Adams at 727-557-7299 or email [sttc@sunrisetabletennis.com](mailto:sttc@sunrisetabletennis.com)**

**FORMAT: Best 3 out of 5, 11-POINT games.**

**SINGLES: Preliminary Round Robin and all players advance to Single Elimination. DOUBLES: RR only.**

**AWARDS: Singles 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Trophy Doubles 1<sup>st</sup>, 2<sup>nd</sup> Trophy**

**EQUIPMENT/Rules:** 12 Tables, Paddles provided or bring your own (no sandpaper), 3 Star 40+ poly Nittaku w hite balls. USATT Rules apply.

**Shirts & Shorts may not be white.**

**SPONSORS:** Queen's Pizza  Paddle Palace  Nittaku 

**REGISTER ONLINE AT: [www.SunriseTableTennis.com](http://www.SunriseTableTennis.com)**

**MAIL-IN REGISTRATION DEADLINE: RECEIVED NO LATER THAN Friday, July 14, 2017**

**Payment by mail: Check or Money Order | Payment at the door: Check, Money Order or Cash**

**Make checks payable to: Sunrise Table Tennis Club**

**SEND TO:** Carolyn Adams 1651 Lakeview Lane #B, Dunedin, FL. 34698

**Phone:** 727-557-7299 **Email:** [sttc@sunrisetabletennis.com](mailto:sttc@sunrisetabletennis.com)

-----Detach and mail entry form-----

Player's Name \_\_\_\_\_ AGE \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

Email \_\_\_\_\_  Subscribe to tournament emails.

PHONE # \_\_\_\_\_ RATING : \_\_\_\_\_ DBL Partner \_\_\_\_\_ Partner Rating \_\_\_\_\_

Yes, I am an STTC Member.  No, I am not an STTC Member.

Yes, I want Membership:  \$35 1-year Adult  \$25 1-year Junior (U18)  \$45 1-year Family

I do not have a USATT rating. I will arrive by 8:15am to be given an estimated rating.

**CIRCLE Events Entered: *Singles* | *Doubles***

**Amount Paid: \$ \_\_\_\_\_**