6th Annual City of Chelsea

Tennis Tournament

To support:



WHEN: August 5th, 6th and 7th 2022 (Friday play will only happen if necessary)

WHERE: Chelsea High School (740 N. Freer), Beach Middle School (if necessary)

<u>COST</u>: \$30 for Singles, \$20 for doubles per player, \$40 for singles and doubles.

HOW TO ENTER: Email the form to: <u>coachatkinson12@att.net</u>, or mail it to 500 Washington St, Chelsea, MI, 48118; Attn: Make a Wish Tournament

Silent auction will be on site! Concessions will be back this year as well!

All money from entry fees, silent auction, and concessions will be donated to Make a Wish Michigan!

ENTRY FORM

Name:						
Date of birth:						
Age Group: (Circle One) Kids:	12 & Under	13-14	15-18			
Adult NPTR Rating:	3.0 or Under	3.5	4.0	4.5 or Up		
UTR rating if known:						
Phone:						
Email:						
Male or Female						
Team:	n: Position on team (if not from Chelsea):					
Doubles partner if playing	g doubles:					
Shirt Size: (Circle One)						
Youth Small Youth Medi	um Youth Large Ad	dult Small Adult	Medium Adult Large	Adult Extra Large	XXL	
Entry Fee: Singles (\$30), Doubles (\$20/player), \$40 (Both) Make checks payable to Make-A-Wish [®] Michigan and send to 500 Washington St, Chelsea, MI, 48118, or give to coach Atkinson						
Additional Donation to the Make a Wish Michigan foundation \$						
Rules: • 12 and under wi	ill play one pro set to	8.				
• 13 and up will play two regular sets to 6 with a tie breaker to 10 instead of a 3rd set.						
 Adults will play two regular sets to 6 with a tie breaker to 10 instead of a 3rd set. 						

- Tournament director can shorten matches at his discretion due to rain, heat etc.
- No coaching. No indoor play. Tournaments may be combined based on the number of entries.

Any questions, contact the tournament director at: coachatkinson12@att.net

By signing below, I agree to the following: I am aware of and understand there may be risks inherent with participating in any recreation activity. We assume all risks and hazards incidental to such participation. In consideration of my child's participation in the activities, I hereby release and discharge the Chelsea School District, its officers, staff, and their agents from any or all liability arising from accident, injury or illness that he or she may suffer as a result from participating in our event. In the event of an emergency, I authorize the Chelsea School District staff and agents to obtain medical treatment for the above participant. I will follow the rules, regulations, and policies set forth by the Chelsea Community Education for this event. I also waive any rights or damages that may occur in result of photographs or videos of the events offered by the Chelsea Community education.

____ Participant or Adult/Guardian if Participant is under