

9+A1



# 9th Annual Ararat Tennis Tournament

## May 1-2 to May 8-9, 2010

Organized by Homenetmen Glendale "Ararat" Chapter

FIRST NAME: _____	LAST NAME: _____	Male <input type="checkbox"/>	
ADDRESS: _____		Female <input type="checkbox"/>	
CITY: _____	STATE: _____	ZIP: _____	Date of Birth if Under 18
HOME PHONE: _____			MM DD YY
WORK PHONE: _____			<input type="text"/> <input type="text"/> <input type="text"/>
E-Mail: _____	<b>Give this application to your coach</b>	COACH NAME _____	

**Age group**

<input type="checkbox"/> 10 & under	<input type="checkbox"/> 14 & under	<input type="checkbox"/> 18 & under	<input type="checkbox"/> Open
<input type="checkbox"/> 12 & under	<input type="checkbox"/> 16 & under		<input type="checkbox"/> Over 35

**Mark Your Category**

<input type="checkbox"/> Advance (4.0 - 4.5)	<input type="checkbox"/> Double
<input type="checkbox"/> Intermediate (3.0 - 3.5)	<input type="checkbox"/> Mix Double
<input type="checkbox"/> Beginner (2.0 - 2.5)	<input type="checkbox"/> Mini Tennis (For starters)

**Competition starts at 8 am, late arrivers will be forfeited.**

**DOUBLE PARTNER'S INFORMATION**

FIRST NAME: _____	LAST NAME: _____	Male <input type="checkbox"/>	
ADDRESS: _____		Female <input type="checkbox"/>	
CITY: _____	STATE: _____	ZIP: _____	
HOME PHONE: _____			
WORK PHONE: _____		E-Mail: _____	

**REGISTRATION FEE:**

<input type="checkbox"/> Under 18	<b>\$25.00</b>
<input type="checkbox"/> Open/Over 35	<b>\$35.00</b>
<input type="checkbox"/> Double	<b>\$25.00 each</b>
<input type="checkbox"/> Mini	<b>\$15.00 each</b>

**Registration Deadline**

*April 1, 2010*

**Disclaimer** (players must sign and date this form):

In conjunction with my participation in activities sponsored by The HOMENETMEN GLENDALE ARARAT CHAPTER (HGAC) and the resulting activities and events, I agree to waive any and all rights and claims for bodily or emotional injury injury to my reputation, or any other damage or harms that I might suffer, or any other claims of any nature I may have against (HGAC), or any organization, facility, or individual associated with (HGAC). I understand, acknowledge and agree tha (HGAC) reserves the rights to cancel, change or amend the structure of the tournament.

Also that I will be participating at my own risk, and the above organizations, facilities and individuals will not be responsible for any harm, injury or damage which I might suffer. I also waive any and all rights to claim damages or remuneration against the (HGAC) or any organization or individual associated there with which may arise as a result of reference to me or photographs there of which may appear in any publication, media or internet.

Player's signature _____	Parent's signature if minor: _____	Date: <input type="text"/> <input type="text"/> <input type="text"/>
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This is your ticket to the games Detach and keep this part with you at all times.

**9th Annual** Location: Glorietta Park.2801 N, Verdugo Glendale CA 91208

**Ararat Tennis Tournament** May1-2 to May 8-9

FIRST NAME: _____	LAST NAME: _____
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WWW.Ararat.org 818-246-2725 Glorietta park

Tournament Director & Head Coach : Vigen Khanlarian