

2024 Rotary Club of Richmond Charity & Fundraising Table Tennis Tournament (Non-Sanctioned)

Fundraising for Senior Playground in Richmond City Parks

March 17, Sunday

Sponsors:



Venue: Bridgeport Sports Club, 11660 Bridgeport Road
Registration: Bridgeport Sports Club (TEL: 604-278-5100) or
 Eddie To (Tel: 604-612-3311)
Deadline: March 10 Sunday 5:00 pm
Events: 1) CBA Alarms, U2750 Singles 2) CBA Alarms, U1250 Singles
 3) Trail Appliances, Age 50-65 Doubles
 4) Mable House Restaurant, Age 66+ Doubles
Fees: \$20 per player per event.
 Each player will get a free t-shirt, first come first serve.

Equipment: Butterfly and Double Fish tables and nets. Butterfly A40 + white balls.
Eligibility: * CBA Alarms, open to players rating points U2750 and U1250 (TTCAN's March ranking)
 * Trail Appliances Age 50 –65 Doubles, for all players who were born from 1972 to 1959
 * Mable House Restaurant Age 66 & Over Doubles, for all players who were born in 1958 or before.

Rules: ITTF Laws and Rules are in effect. Racket coverings must have ITTF-Approved rubbers.

Note: A player can enter two events at a maximum. One age event and one singles event.

Format: Each event has a preliminary round-robin followed by a single knockout with a best of 3 to 11 points. The organizing committee reserves the right to alternate the playing format depending on the number of entries for each event.

Prize: CBA Alarms U2750 & U1250 Singles 1st 2nd 3rd & 4th Medals
 Trail Alliances Age 50-65 Doubles 1st 2nd 3rd & 4th Medals
 Mable House Restaurant Age 66+ Doubles 1st 2nd 3rd & 4th Medals

Schedule

Door Open 9 am
Age 50-65 Doubles 9:30am **Age 66& Over Doubles** 9:30am
U2750 & U1250 Singles 2:00pm

Entry Form

Name: _____ **Male/Female**
Date of Birth: _____ (yyyy/mm/dd)
Tel: _____ **E-mail:** _____

U2750 Singles (Fee: \$20.00/ea) U1250 singles (Fee: \$20.00/ea)

Name: _____ **Male/Female**
Date of Birth: _____ (yyyy/mm/dd)
Tel: _____ **E-mail:** _____

Age 50-65 Doubles (All players who were born from 1972 to 1959) (Fee: \$20.00/ea)

Partner's Name: _____ **Male/Female**
Date of Birth: _____ (yyyy/mm/dd)
Tel: _____ **E-mail:** _____

Age 66+ Doubles (All players who were born in 1958 or before) (Fee: \$20.00/ea)

Partner's Name: _____ **Male/Female**
Date of Birth: _____ (yyyy/mm/dd)
Tel: _____ **E-mail:** _____

Waiver: I fully understand that Table Tennis activities involve risks and dangers of serious bodily injury. I hereby release, discharge and covenant not to sue the organizer, sponsors, premises holders, committee members, officials and volunteers on which the activity takes place. I have read its terms and have signed it freely.

Player 1 Signature: _____ **Player 2 Signature:** _____

Date: _____ **Date:** _____