

# 11<sup>th</sup> Annual Ghostly Classic

sport&health

October 16-18, 2009



- **Location:** Crystal Gateway Sport & Health Club, 1235 South Clark Street Arlington, VA 22202
- **Awards** \$300 1<sup>st</sup> Place, \$150 2<sup>nd</sup> Place in Open divisions. Minimum of 12 entrants per division for full prize money, otherwise prorated. All other division will get plaques or trophies.
- **Deadline:** Online: Monday, October 12, 2009 at midnight. Mailed in: Postmarked Friday, October 9, 2009.
- **Starting times** Available online at <http://www.novaracquetball.com> or call 703.416.4900 after 9:00 a.m. on Thursday, October 15<sup>th</sup>. Play may begin at **noon** on Friday afternoon. Please be prepared to play early.
- **Hospitality** Tournament shirts for all participants. Friday – dinner. Saturday - breakfast, lunch, and dinner. Sunday - breakfast and lunch.
- **Hotel** – The **Crowne Plaza Hotel** in Arlington is our host hotel. You can reserve rooms directly on our website, [www.novaracquetball.com](http://www.novaracquetball.com). This hotel is right next door to the club at 1480 Crystal Drive. Reservations can also be made by calling 703-416-1600.
- **Official rules**
  - **Eyewear**• USAR Official Rules will govern competition [available for reference online at [www.usra.org](http://www.usra.org)]; including the mandatory use of protective lensed eyewear tested to ASTM F803 or CSA impact standards.
  - **Age Requirement**• for age division competition, players must meet the age requirement as of the first day of competition.
  - **Membership**• USAR membership is required of all participants. At registration, entrants must present a current membership card, a receipt, or a cancelled check indicating recent enrollment as proof of membership, or purchase a membership on site for \$50.
  - **Officiating**• All players must report to the tournament desk after their match for referee assignments. All players will be required to referee, find a suitable substitute, or forfeit from their division.
  - **Rules**• All Open matches will follow the 1-serve rule. All matches will consist of the best 2 out of 3 games, the first 2 games to 15, tiebreaker to 11, if necessary.
- **Tournament directors:** Karen Denu, Wayne Toyne, Bill Milbach
- **Official ball:** Ektelon Fireball
- **Guidelines**
  - All matches will be monitored and sandbaggers will be forfeited with no refund.
  - Player will forfeit if not checked in at the tournament desk 30 minutes prior to schedule playing time.
  - Tournament directors have the right to deny or reclassify any entrant.
  - Divisions may be combined or eliminated if there are not enough entrants.
  - Juniors are eligible to play in both Junior and Adult divisions.
  - No consolation rounds.
  - Stringers will be available throughout the tournament.
- **Facility:** Established in 1973, the Sport & Health Company is the region's largest family of full service health and fitness clubs. With 22 locations in VA, MD, and DC, Sport & Health Clubs provide a full range of fitness, recreation and sport activities for all ages in a friendly, comfortable environment. Directions: Surf to <http://www.novaracquetball.com> for directions, or call the club at (703) 416-4900.

If you have any questions, please email Karen Denu at [kdenu318@yahoo.com](mailto:kdenu318@yahoo.com), or call - 703-597-9985.

**Tournament Entry and Payment:**

Please go to [www.novaracquetball.com](http://www.novaracquetball.com) for online entry via Paypal, or to get a PDF version of this form to print off, complete, and mail.

Mail the entry (with a check payable to Karen Denu) to:

**Ghostly Tournament  
c/o Karen Denu  
432 Clayton Lane  
Alexandria, VA 22304**

If you have any trouble, email Karen at [kdenu318@yahoo.com](mailto:kdenu318@yahoo.com) with the same information.

**ENTRY FORM • Please Print**

Name \_\_\_\_\_ Gender: M | F

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Birth date \_\_\_\_\_ Age \_\_\_\_\_

Email \_\_\_\_\_

Club Affiliation \_\_\_\_\_

Doubles partner/Division \_\_\_\_\_

Doubles partner/Division \_\_\_\_\_

**FEES & PAYMENT**

First Open event \_\_\_\_\_ (\$50.00) \_\_\_\_\_

Second Open event \_\_\_\_\_ (\$25.00) \_\_\_\_\_

First event \_\_\_\_\_ (\$40.00) \_\_\_\_\_

Second event \_\_\_\_\_ (\$20.00) \_\_\_\_\_

Juniors (1 or 2 events) \_\_\_\_\_ (\$25.00) \_\_\_\_\_

TOTAL DUE: \_\_\_\_\_

**IMPORTANT:** Make check payable to: **Karen Denu**

**Waiver:** I hereby, for myself, me heirs, executors, and administrators, waive and release any and all rights and claims that I may have against the Crystal Gateway Sport and Health Club, CVRA, USAR, or their respective agents for any and all injuries. I also acknowledge the potential risk of eye injury during competition, and can provide written proof that my protective eye guards (including prescription frames/lenses) conform to all standards specified in USAR Rule 2.5(a).

**MEN'S •Singles• WOMEN'S**

- \_\_\_\_\_ Open \_\_\_\_\_
- \_\_\_\_\_ Elite \_\_\_\_\_
- \_\_\_\_\_ A \_\_\_\_\_
- \_\_\_\_\_ B \_\_\_\_\_
- \_\_\_\_\_ C \_\_\_\_\_
- \_\_\_\_\_ D \_\_\_\_\_
- \_\_\_\_\_ 24- \_\_\_\_\_
- \_\_\_\_\_ 25+ \_\_\_\_\_
- \_\_\_\_\_ 30+ \_\_\_\_\_
- \_\_\_\_\_ 35+ \_\_\_\_\_
- \_\_\_\_\_ 40+ \_\_\_\_\_
- \_\_\_\_\_ 45+ \_\_\_\_\_
- \_\_\_\_\_ 50+ \_\_\_\_\_
- \_\_\_\_\_ 55+ \_\_\_\_\_
- \_\_\_\_\_ 60+ \_\_\_\_\_
- \_\_\_\_\_ 65+ \_\_\_\_\_
- \_\_\_\_\_ 70+ \_\_\_\_\_
- \_\_\_\_\_ 75+ \_\_\_\_\_
- \_\_\_\_\_ 24- A \_\_\_\_\_
- \_\_\_\_\_ 24- B \_\_\_\_\_
- \_\_\_\_\_ 24- C \_\_\_\_\_
- \_\_\_\_\_ 25+ A \_\_\_\_\_
- \_\_\_\_\_ 25+ B \_\_\_\_\_
- \_\_\_\_\_ 25+ C \_\_\_\_\_
- \_\_\_\_\_ 35+ A \_\_\_\_\_
- \_\_\_\_\_ 35+ B \_\_\_\_\_
- \_\_\_\_\_ 35+ C \_\_\_\_\_
- \_\_\_\_\_ 45+ A \_\_\_\_\_
- \_\_\_\_\_ 45+ B \_\_\_\_\_
- \_\_\_\_\_ 45+ C \_\_\_\_\_
- \_\_\_\_\_ 55+ A \_\_\_\_\_
- \_\_\_\_\_ 55+ B \_\_\_\_\_
- \_\_\_\_\_ 55+ C \_\_\_\_\_

- \_\_\_\_\_ Juniors 18- \_\_\_\_\_
- \_\_\_\_\_ Juniors 16- \_\_\_\_\_
- \_\_\_\_\_ Juniors 14- \_\_\_\_\_
- \_\_\_\_\_ Juniors 12- \_\_\_\_\_
- \_\_\_\_\_ Juniors 10- \_\_\_\_\_

**MEN'S •Doubles• WOMEN'S**

- \_\_\_\_\_ Open \_\_\_\_\_
- \_\_\_\_\_ A \_\_\_\_\_
- \_\_\_\_\_ B/C \_\_\_\_\_
- 
- Mixed Open \_\_\_\_\_
- Mixed A \_\_\_\_\_
- Mixed B/C \_\_\_\_\_

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_