



**March  
5-9**

**SINGLES  
TOURNAMENT**

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Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ wk. \_\_\_\_\_ hm.

Cell phone # \_\_\_\_\_

e-mail address: \_\_\_\_\_

Male     Female

3.0     3.5     4.0     4.5

Availability:  Lunchtimes

Evenings

Time conflicts: \_\_\_\_\_

**Format:** Single-Elimination

**Entry Fee:** \$10 plus 1 can of balls

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**PARTICIPATION WAIVER**

I hereby, for myself, my heirs, executors and administrators, waiver and release all rights and claims I may have against the Wenatchee Racquet & Athletic Club, tournament coordinators, sponsors, and their respective agents for any and all injuries which may be suffered by me connection with any participation in the Chilly Dog, March 5-9, 2012.

I certify my compliance to the above with my signature below.

\_\_\_\_\_