



Adult World Team Tennis Summer/Fall 2011 League



Coordinator	Ace Performance Inc. John and Louise Downey (352) 650-6268 (cell phone) (352) 666-0658 www.louisedowney.usptapro.com
Format	Each team will consist of 4 women & 4 men with abilities between 2.5 – 4.5. Matches will be one ladies singles, one men’s singles, one ladies doubles, one men’s doubles, and one mixed doubles.
Fees	\$25 per player includes tennis balls, rental fees, and awards.
Schedule	<p>All matches will be played on the following Fridays from 7:00 pm to 9:00 pm:</p> <ul style="list-style-type: none"> ○ August 12 & 19 ○ September 9, 16, 23 ○ October 7 & 14 <p>We will inform you in advance of any changes to our schedule. Please check our website for any changes to our schedule. www.louisedowney.usptapro.com</p>
Where	<p>Hernando Park (Behind the Brooksville Library) 205 East Fort Dade Avenue Brooksville, FL 34601-2613</p>
Snacks & Refreshments	Teams will be scheduled on a rotating basis to bring snacks and beverages



Adult World Team Tennis Summer/Fall 2011 Entry Form



Please print as you provide the following information.

Player's Name:			
Address:	City:	State:	Zip:
Phone:		Alternate Phone:	
E-mail address:			
Do you need a team partner? Please circle one	Yes No		
Please indicate name of team partner:			
Are you a USTA member Please circle one	Yes No		

Waiver

I know that playing tennis is a potentially hazardous activity. I know that I should not join or play in this event unless I am medically fit and able to participate and am properly trained. I assume all risks associated with playing in this event including, but not limited to, falls, contact with other players, and effects of weather, including high heat and/or humidity, and conditions of the court, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of this entry, I, for myself, and anyone entitled to act on my behalf, waive and release Ace Performance Inc., Nature Coast Tennis Foundation, Nature Coast Technical High School, Hernando County, City of Brooksville Parks and Recreation, and Hernando County Parks and Recreation, their directors, officers, members, and all sponsors, their representatives, and successors from all claims and liabilities of any kind arising from or out of my participation in this event, even though such liability may arise out of negligence or carelessness on the part of the persons or entities named in this waiver.

I hereby consent to the rendering of emergency first aid and other medical procedures, which, at the time of injury or illness, seems reasonably advisable. I further understand that I will be responsible for payment of any such medical procedures.

I grant permission to all of the foregoing persons and entities listed herein to use any photographs, motion pictures, video recordings, or any other recordings of this event for any legitimate purpose.

Please sign below.

Player: _____

Date: _____

For Office use only

Amount Paid _____	Cash _____	Check# _____
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This completed form and your entrance fee (cash, check, or money order) must be mailed to: Ace Performance Inc., c/o John and Louise Downey, 1139 Alloway Ave., Spring Hill, FL, 34608.