

ADULT SPORTS



DOUBLE ELIMINATION MIXED PICKLEBALL TOURNAMENTS (BEGINNER) SATURDAY, JUNE 1 | 10 AM—2 PM (ADVANCED) SUNDAY, JUNE 2 | 10AM—2 PM

The Geneva Lakes Family YMCA will be holding a Mixed Doubles Pickleball Tournament with a beginner and advanced level. Each tournament will be a double-elimination bracket with seeding chosen at random. Bracket will be emailed to participants and will be posted inside the Priebe Gym.

TEAMS

Register as a team or register as an individual and be randomly paired with another registered individual. Maximum number of teams 16 | Minimum number of teams 8

RULES

Traditional Pickleball tournament rules will be used and posted in the gym on the day of the tournament. Each tournament is a one day tournament with two games guaranteed. Games played to 11, must win by 2, score on serve. USAPA Rules apply.

FEE

Member: \$20/team, single player \$10
Community: \$40/team, single player \$20

**Volunteer line judges and
kitchen watchers needed.**

REGISTRATION | QUESTIONS

Register by Saturday, May 25 at the Front Desk. Please contact Avi Mor, Sports Director with any additional questions at avi.mor@glymca.org or call 262.248.6211 x30.



BATTLE OF THE PADDLE PICKLEBALL REGISTRATION FORM

Tournament Fees: \$20 per team, single player \$10 CP: \$40 per team, single player \$20

PLAYER #1 NAME	BEGINNER RATING SCALE 1.5-3.0	PLAYER RATING _____	ADVANCED RATING SCALE 3.5+
ADDRESS	CITY	STATE	ZIP
EMAIL	AGE	GENDER	
PHONE			
EMERGENCY CONTACT	PHONE NUMBER		

PLAYER #2 NAME	BEGINNER RATING SCALE 1.5-3.0	PLAYER RATING _____	ADVANCED RATING SCALE 3.5+
ADDRESS	CITY	STATE	ZIP
EMAIL	AGE	GENDER	
PHONE:			
EMERGENCY CONTACT	PHONE NUMBER		

By signing this form, I verify that:

- *I have read and understand that the application and procedures and agree that this information is correct.
- *I hereby certify that I am in normal health and capable of safe participation in the YMCA's Battle of the Paddle" Pickleball Tournament.
- *I assume all risks and hazards incidental to the conduct of this program. The Geneva Lakes Family YMCA is not responsible for any medical costs that result from my participation in this program/tournament.
- *I hereby authorize the YMCA to obtain medical treatment for me in the event my emergency contact cannot be reached.
- *I understand that if there is interference to the practices or game from the players or spectators, the players and/or spectators may be asked to leave the facility so games can continue in a fun and enjoyable manner.
- * I give permission for my picture to be taken and used in YMCA promotional materials that may include social media.

Player #1 Signature _____ Date _____

Player #2 Signature _____ Date _____

**For questions or more information contact Avi Mor, Sports Director
262.248.6211 or avi.mor@glymca.org**