# DOUBLES TENNIS TOURNAMENT

ENTRY DEADLINE: THURSDAY, SEPTEMBER 13th
Campus Recreation in the Student Recreation Center, by 7:00 pm

ENTRY FEE: $4.00 PER TEAM (Includes one can of tennis balls)

PLAY BEGINS: SUNDAY, SEPTEMBER 16th 10:00 am at the assigned court. Matches will be scheduled throughout the entire day. Schedules will be available in the Campus Recreation office on Friday, SEPTEMBER 14, 1:00 pm.

FORMAT: SINGLE ELIMINATION TOURNAMENT. ALL MATCHES WILL BE 2 OF 3 SETS. NO ADD SCORING!! The first team to win 6 games in a set will be declared the winner. There will be no tie breakers.

1. Check your Intramural Sports Handbook in regard to eligibility, protests, rescheduling, etc.

2. An organization may enter three (3) teams to represent their living unit. However, intramural points will only be awarded to the team advancing the furthest in the tournament; other teams of an organization may enter as Independents.

3. The $4.00 entry fee per person includes a can of tennis balls to be picked up at first round match by each team. One new can should be used in each match. The winner will get the unused can of tennis balls to advance to the next match.

4. **GAME TIME IS FORFEIT TIME!!!!**

5. Please read the attached forfeiture agreement, participation agreement and roster information and return with signatures to the Campus Recreation Office by THURSDAY, SEPTEMBER 13.

6. Check in 15 minutes before your match at the PEB Tennis Courts with the Intramural Supervisor.

7. All participants must have a waiver on file before playing Intramural Sports.

CAMPUS REC
INTRAMURAL SPORTS
uidaho.edu/intramurals

# 2012 INTRAMURAL TENNIS DOUBLES TOURNAMENT

TEAM/ORGANIZATION_____

TELEPHONE_____

Circle One GREEK INDEPENDENT RESIDENT HALL _____

FORFEITURE AGREEMENT

I hereby grant Intramural Sports permission to charge a fee to my university account in the event that my intramural team forfeits its scheduled game. The forfeit will cost me $5.00.

CAPTAIN'S NAME_____STUDENT ID#_____

SIGNATURE_____EMAIL ADDRESS_____

PHONE_____

**Team 1~**
NAMES_____/_____ PHONES_____/_____

**Team 2~**
NAMES_____/_____ PHONES_____/_____

**Team 3~**
NAMES_____/_____ PHONES_____/_____

**PLEASE RETURN COMPLETED FORM TO CAMPUS RECREATION BY 9/22/11 BY 7PM.

For Office Use Only:
☐ Signed (2)
☐ ID Checked
☐ Paid
Initial _____