**ENTRY FORM**

|  |  |  |
| --- | --- | --- |
| **Family Name** | **First Name** | **Contact Information** |
|   |  | **Home Phone:** |
| **Mailing Address** | **Office Phone:** |
|   | **Mobile Phone:**  |
|  |  **E-mail:** |
| **PLAYERS May Only Enter A Maximum of Two (2) Events.** |  |  |   |
| Please ENTER me in the following events: |  |  |   |
| **1.** |  Men’s Open Singles | □ |  |  |  |  |   |
| **2.** | Veterans Men's Singles | □ |  |
| **3.** | Ladies Singles | □ |  |  |  |  |   |
| **4.** | Mixed Doubles | □ | Partner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Partner ----------------------------------- |
|  | Date of Birth:  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
|   |  | (dd/mm/yy) |  |  |  |  |   |
|   |  |  |  |  |  |  |  |   |
| **All Entries Must Be Made on This Official Form and Sent or given to any committee member** |
|  | Michael Cooper | **380 7604** |  |
|  | Walt Ifill | **681 6467** |  |
|  |  |  |
| **Entries Must Be Received On, Or Before,the Closing Date Specified -Wednesday 26th February, 2020** |
| **Player's Signature** | **I declare to be aware of and will abide by the Rules and Regulations of the St James Tennis Club Open Tennis Tournament as stipulated in the attached Prospectus.** |
|   |
| **Date** |   |

Entry Fees –

All Events – TT$120.00

St James Tennis Club Members– $50.00

**ST JAMES TENNIS CLUB OPEN TOURNAMENT 2020**

**RECEIPT**

Received from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The sum of$\_\_\_\_\_\_\_\_\_

For entry in the following events: 1 2 3 4 (Circle the applicable number)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tournament Official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_