

New York Indoor Sport Club (NYISC) *November 2017* Open

(2-star) USATT-sanctioned Table Tennis Tournament

Sunday, November 12, 2017

ENTRY DEADLINE: November 9, 2017



BUTTERFLY

NO.	EVENT NAME	FORMAT	DAY	TIME	FEE	1 ST	2 ND	3 RD /4 TH	LIMIT
1	Under 2450	RR/SE ⁽¹⁾	SUN	2:30 PM	\$35	\$150	\$75	-	32
2	Under 2250	RR/SE ⁽¹⁾	SUN	1:00 PM	\$35	\$100	\$50	-	32
3	Under 2100	RR/SE ⁽¹⁾	SUN	11:30 AM	\$35	\$100	\$50	-	32
4	Under 1950	RR/SE ⁽¹⁾	SUN	10:30 AM	\$25	T ⁽²⁾	T ⁽²⁾	-	32
5	Under 1600	RR/SE ⁽¹⁾	SUN	1:00 PM	\$25	T ⁽²⁾	T ⁽²⁾	-	32
6	Under 1400	RR/SE ⁽¹⁾	SUN	11:30 AM	\$25	T ⁽²⁾	T ⁽²⁾	-	32
7	Under 1200	RR/SE ⁽¹⁾	SUN	10:00 AM	\$25	T ⁽²⁾	T ⁽²⁾	-	32
8	Doubles U-3800	RR/SE ⁽¹⁾	SUN	4:00 PM	\$20/Player	40%	20%	-	32

⁽¹⁾RR = Round Robin;
SE = Single Elimination
⁽²⁾T=Trophy;

VENUE: New York Indoor Sports Club (NYISC), 15-35 126th Street, 2nd Floor, College Point, NY 11356 718-358-8860 (Yu Shao)

PARKING: Street and metered parking; Free on Sundays

CHECK-IN: Please check in 15 minutes prior to the start time of your event.

COMMITTEE: Yu Shao (Tournament Director), Jean Sze (RR/RU)-USATT Certified Referee

EQUIPMENT: Only ITTF/USATT-approved equipment will be used.

Tables: Butterfly Centerfold and Europa; Nets: Butterfly; Balls: white, Butterfly 40+ poly balls; Floor: rubberized sports mat on wood floor.

DEADLINE: All postal mail entries must be postmarked latest by November 9, 2017. Phone entries will be accepted, but player will not be placed into draw until payment is received. Late phone entries will be accepted with a \$5 late fee subject to space availability.

FORMAT: Players will be assigned to a Round Robin (RR) group of 3-5 players. Top 1-2 players from each (RR) group will advance and compete in the play-off Singles Elimination (SE) stage. **All matches are 3 out of 5 games**

RATINGS: USATT ratings as of November 4, 2017 will be used. Estimated rating will be assigned by Tournament Committee if USATT rating is not available.

ELIGIBILITY: EVERYONE IS WELCOME! For non-USATT membership, you may purchase a \$20 tournament pass + event fees to participate.

DEFAULT POLICY: All entries must include full payment in order to be included in the draw(s). All ITTF/USATT regulations apply. Must abide by all USATT rules. If an event is canceled or has reached its limit, player will be moved to the next highest event.

Tournament committee reserves the right to cancel any event if there are insufficient entries. No prize money shall be awarded for splits and/or unfinished matches. NO EXCEPTIONS!

REFUND: Players will be refunded entry fees one week prior to tournament dates. Refunds will not be given for any withdrawals after that date. No refund for no-show participants!

DIRECTIONS:
www.indoorsportsny.com

E-MAIL REGISTRATION:
nyisc@yahoo.com

NYISC Table Tennis *November 2017* Open

ENTRY DEADLINE: November 9th, 2017

First Name _____ Last Name _____

USATT Member ID/Expiry Date _____ / _____ USATT Rating _____

Email Address _____ @ _____ New USATT Member?

Street Address _____ City _____

State _____ Zip _____ Phone (_____) _____ - _____

Date of Birth (MM/DD/YYYY) _____ / _____ / _____ Home Club _____

By my participation, I hereby relieve all sponsors, NYISC, USATT and tournament committee of any liabilities for injury to myself and/or property damage or loss. I agree to comply with all decisions of the tournament officials. I will abide by all USATT/ITTF regulations.

Signature (Parent/Guardian if minor): _____ Date _____ / _____ / 2017

Circle the events you wish to enter:

1 2 3 4 5 6 7 8

Total Event Fee \$ _____

Official Fee \$ 3.00

USATT Membership Fee \$ _____

Under 18: \$45; 18 & over: \$75;
Three-year: \$210

TOTAL AMOUNT DUE \$ _____

Please send completed entry form and make check/money order payable to:

New York Indoor Sports Club (NYISC)
15-35 126th Street, 2nd Floor
College Point, NY 11356
RE: NYISC November 2017 Open

Inquiries: Yu Shao - Office: 718-358-8860
nyisc@yahoo.com

All returned checks will be charged a \$25 fee.
Entries must be postmarked by Wed, November 9th, 2017 to avoid a \$5 late fee.

FOR OFFICIAL USE ONLY CASH CHECK M/O RECEIVED BY