

USAR SANTIONED EVENT:

MUST BE CURRENT USAR Member to Participate. Memberships available @ Check In Desk. Adult Membership \$35.00 Junior \$20.00

**Pro Clinic Thursday, August, 24th, 7pm
\$30.00/person**

OTHER STUFF:

Player Guests Meal Tickets \$10.00/day

For Additional Info Go To:

www.elmwoodracquetball.com or
www.laracquetball.org

**Friends of the Game and the Players
that make this tournament possible:**

Charlie Hollinger | Guy Keller | Joe Sherrill
| Bryan Shaw | Neil White | Pattie Schof

Tournament Director:

AL SCHOF reserve(s) the right to combine or cancel any division due to insufficient entries.

Ball: ProPenn HD

HOST HOTEL

SLEEP INN SUITES

4601 North I-10 Service Road
Metairie, LA 70006 Phone: (504) 887-5337
Fax: (504) 883-5895 | Ask for The
"racquetball tournament rate" | MUST
CALL THE DIRECT NUMBER TO GET
RATE | \$71.99 for King and Double
rooms | Rates are good until August 14,
2006, then will be first come, first serve



MAIL ENTRY TO

**ELMWOOD
FITNESS CENTER**

A division of Ochsner Clinic Foundation

Attention: Al Schof

PCNOLA

1200 S. Clearview Parkway, Suite 1200
Harahan, LA 70123

www.elmwoodracquetball.com



A Racquetball Celebration

August 25, 26, 27, 2006

@

Elmwood Fitness Center

1200 S. Clearview Parkway, Suite 1200
Harahan, LA 70123



Tier Three Event

TOURNAMENT DIRECTOR

Al Schof

(225) 936-4508

alschof@elmwoodracquetball.com

For information only

**TWO DIVISION LIMIT, UNLESS 3RD
EVENT IS MEN'S PRO**

SKILL DIVISIONS

<u>MEN'S</u>	<u>WOMEN'S</u>
PRO/ OPEN	OPEN
A	A
B	B
C	C
D	D
35+	35+
45+	45+
55+	55+
<u>DOUBLES Divisions</u>	
OPEN	A

Age Requirement:

For age division competition, players must meet the proper age requirement as of the first day of the event.

Starting Times:

Please check start times online . Start times for first round matches will be available after 2:00 PM Thursday 8/24/2006 . Call 504-733-1600 if you don't have internet access. Play starts at 4:00 PM on Friday 8/25/2006 .

AMOUNT: Pro/Open \$60.00 _____

1st EVENT \$40.00 _____

2nd EVENT \$20.00 _____

TOTAL: _____

Make all checks payable to LRA

I hereby release Elmwood Fitness Center and Alton Ochsner Medical Foundation, its successors, employees, and agents from any and all liability for any injury or damages which may occur as a result of my participation in Elmwood activities, including all risks connected therewith, whether foreseen or unforeseen and further agree to save and hold harmless Elmwood Fitness Center and Alton Ochsner Medical Foundation its officers, employees, directors from any claim by me on my behalf.

Signature: _____

(Under 18, Parent must Sign)

Date: _____

DEADLINE - MON. AUGUST 21, 2006

ALL DIVISIONS : **NO LATE ENTRIES WILL BE ACCEPTED.** Mail entries must be postmarked no later than Monday 8/21/2006 . Phone entries will be accepted through Monday 8/21/2006 no later than 6:00 PM by calling 225-936-4508

CHECK-IN

Check-in for all divisions will begin Friday, August 25, @ 3:00pm and will continue throughout the weekend. It is recommended that you check-in at least one half hour throughout the weekend before your scheduled time.

TOURNAMENT WILL RUN ON TIME.

RULES

All players must be members of the USAR. New memberships & Renewal will be made available by the LRA at the Check-in Desk. **WINNERS MUST REFEREE TO ADVANCE.**

PRIZE MONEY

PRO/OPEN 1st \$1500, 2nd \$1250, Semi's \$500
First Round Losers Drop Down to Open 1st \$250, 2nd \$175

Name: _____

Address: _____

Phone # Day: _____

Evening: _____

E-Mail _____

Doubles Partner(s) 1) _____

2) _____