

# 2017 Peachtree Open/Ron Cook Memorial 1<sup>st</sup> Pro-Stop of WPH Pro Tour

October 6-8, 2017

**Site:** Recreation-Atl, 754 Beaver Run Road, Lilburn, GA 30047 Tel770/676-0435

**Entry Fee:** \$75 first event \$30 for second event. Must be a current USHA member and meet appropriate age requirements. Make payments to GA Handball Assoc.

**Deadline:** Entries must be received by Tuesday, October 3<sup>rd</sup>, 2017

**Entries:** Register on line at R2Sports.com Email questions: Lance Wachholz, l.wachholz@efourdesign.com

**Start Times:** Available Thursday Oct. 5<sup>th</sup> on R2sports.com by 2:00 p.m. EST

**Awards:** For first and second place. Prize money for top 16 pro singles!

**Notes:** Current USHA rules will apply. Amateurs referee their own matches. Eye protection is mandatory. The tournament committee reserves the right to reclassify players and/or combine or remove divisions in the event of insufficient entries. Consolation in all divisions.

**Lodging:** Fairfield Inn, 3570 Breckinridge Blvd. Duluth, GA 30096 678-924-1023  
\$91.00/ night. Reference Peachtree Open. Directions available upon request.

**Hospitality:** Daily hospitality and Saturday night party.

**Special Event: Pro/Am Corn Hole tournament at the Saturday night party.**  
**Pros will be teamed with amateurs(donors). Entry fee is a \$100 donation (or \$250 donation to request the Pro you would like to play with). \$100 dollar donors will be assigned a Pro player randomly. Prize money will be awarded to the finalists. Limited spots available. Email your request early to the tournament director l.wachholz@efourdesign.com**

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| <input type="checkbox"/> Pro singles   | <input type="checkbox"/> 80+ Combined Doubles minimum age 30  |
| <input type="checkbox"/> Pro Qualifier | <input type="checkbox"/> 100+ Combined Doubles minimum age 40 |
| <input type="checkbox"/> B/C Singles   | <input type="checkbox"/> 120+ Combined Doubles minimum age 50 |
|  | <input type="checkbox"/> 130+ Combined Doubles minimum age 60 |

Player Name: \_\_\_\_\_ Age \_\_\_\_\_

Doubles Partner: \_\_\_\_\_ Age \_\_\_\_\_

Player Address: \_\_\_\_\_

Player Phone Numbers: \_\_\_\_\_

Waiver and release: The undersigned in consideration of this entry being accepted, hereby assumes all responsibility for any and all risk and damage or injury that might occur or arise from participation in this event. The undersigned specifically releases and discharges the Recreation ATL, the USHA, WPH, Georgia Handball Association, their agents, representatives, successors or assigns, for any or all injuries that may arise from participation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_