



# CANCER TENNIS TOURNAMENT

Sponsored by the Staunton Waynesboro Augusta Tennis Association

www.swatennis.org

**July 16-19, 2009**

**at the Ridgeview Park Tennis Courts. Wavnesboro**

## Events

**Men's Doubles  
Women's Doubles  
Mixed Doubles**

## **GAME**

2 sets with no add scoring and championship tie breaker  
(2 rounds guaranteed)

**Director: Gloria Armentrout**  
540-256-2649  
tenniswoman@comcast.net

**Committee: Pat Austin  
Danny Leech**

- **Fees:** \$25.00 first event, \$15.00 additional event.  
*Please make check out to Am. Cancer Society.*
- **Entry Deadline: Friday July 10th, 6 pm.**
- **Times:** Play will begin at 6:00 PM on Thursday/Friday  
Play will begin at 8:00 AM on Saturday  
Play will begin at 12:00 PM on Sunday
- **Commitment:** Scheduling conflicts will not be accommodated during any of the tournament. Everyone must play as scheduled or forfeit.
- **First Round:** First round times will also be in the Daily News Leader and AMC on Wednesday July 15th.
- **Check-In:** Players need to arrive 15 minutes early for each match to check-in and receive court assignments. Only 10 minutes will be allowed for warm-ups including serves.

(Detach and Return)

## **Entry Form**

Name \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_ Men's Doubles / Partner \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

\_\_\_ Women's Doubles / Partner \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

\_\_\_ Mixed Doubles / Partner \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

Total cost \_\_\_\_\_ Amount enclosed \_\_\_\_\_

**Medical Release:** Acceptance of my entry in this tournament is without assumption of responsibility of any kind by the Staunton Waynesboro August Tennis Association, the Tournament Committee or the Tournament Director. I do hereby for and on behalf of myself and my heirs and legal representative release and forever discharge the above named from any and all claims and all damages, losses, or injuries which may be suffered or sustained by me in connection with my activities during the tournament period. I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND INDEMNITY AGREEMENT.

Player's signature \_\_\_\_\_ Date \_\_\_\_\_

Make check payable to Am. Cancer Society and send by July 9th :

S.W.A.T.  
P.O. Box 2082  
Staunton, VA 24402-2082