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**ADULT ANNUAL CHAMPIONSHIPS**

**22/23/24th of March and 20th April 2024**

**Matches will commence on Friday 22nd at 4:30pm except for other events indicated below**

|  |  |  |
| --- | --- | --- |
| **EVENT**Please CIRCLE or TICK event number/s | **Partner** | **Fee** |
| 1. Men's Singles Open Championship |  | $15.00 |
| 2. Men’s O/35 Singles |  | $15.00 |
| 3. Men's Doubles Championship |  | $8.00 ea |
| 4. Mixed Doubles Champs. (1 pm Sat. 20th April) |  | $8.00 ea |
| 5. Ladies Singles Open Championship |  | $15.00 |
| 6. Ladies Doubles Championship |  | $8.00 ea |
| 7. Parent & Child Doubles (1 pm Sat. 20th April) |  | $8.00 ea |
| 8. Ladies O/35 Singles |  | $15.00 ea |
| **Nominations close 11:59pm Thur. 14Th March 2024** | **TOTAL FEE** | **$** |

Please note:

\* Players may enter a **maximum of 2 events played over 22/23/24th March and 20th April 2024** or 1 if unavailable for any morning or afternoon.

\* Players may also enter the Championship Mixed Doubles Or Parent & Child and other age events if they satisfy the age requirements.

\* Players must be available on all 3 days of the championships and state when unable to play.

\* Payment must be made with entry form by cash, credit card or bank transfer.

\* Age requirements must be satisfied as at 31st March 2024

\* Events may be combined if there are insufficient entries.

NAME: ......................................................…….……….UTR Rating:............... Date of birth………………

ADDRESS:.....................................................................................................................................................…..

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Times not available:..............................................................................................................................................................

**Payment Type: □ Cash □ Credit Card □ Bank Transfer (BSB 306074, Account No. 418 7825)**

**Credit card details**

Credit card number: \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ /\_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ CCV: \_\_ \_\_ \_\_

Name on card:…………………………………………………. Expiry date: \_\_ \_\_ / \_\_ \_\_

SIGNED:................................................................................DATE:.....................................….………

**NORMAL TOURNAMENT CONDITIONS APPLY**