

DELAWARE COUNTY TENNIS OPEN

August 3-8, 2010

Site: Delta HS (7 courts) Muncie Central HS (8 courts)	
Days: Tuesday, Aug. 3 to Friday, Aug. 6 5:30 to 10:30 p.m. Saturday, Aug. 7 8 a.m. to 8 p.m. Sunday, Aug. 8 8 a.m. to finish	
Entry deadline: 6 p.m. Wednesday, July 28	
Draw posted: By 4 p.m. Monday, Aug. 2 at www.dhstennis.org It is each player's responsibility to check times!	
Entry fees: \$18 singles \$28 per team for doubles, mixed doubles Checks payable to Muncie Tennis Association	
Tournament director: Tim Cleland (765-730-3288)	Miscellaneous: Guaranteed at least two matches in each division Dunlop Grand Prix balls are provided by tourney Matches are best 2 of 3 sets Consolation matches = 10-point tiebreaker in lieu of 3rd set Players limited to 3 divisions For age divisions, all ages are as of Aug. 3, 2010 "A" divisions for players rated 4.0 and higher All entrants will receive T-shirt Awards for champs, runners-up, consolation champs

NAME: _____ **BIRTHDATE:** _____
ADDRESS: _____
CITY: _____ **ZIP:** _____ **EMAIL:** _____
PHONES: (home) _____ (work) _____ (cell) _____
SHIRT SIZE: (circle one) S M L XL XXL

<input type="checkbox"/> Men's A Singles <input type="checkbox"/> Men's B Singles <input type="checkbox"/> Men's 40+ Singles	<input type="checkbox"/> Women's A Singles <input type="checkbox"/> Women's B Singles <input type="checkbox"/> Women's 40+ Singles
<input type="checkbox"/> Men's A Doubles	My partner will be _____
<input type="checkbox"/> Men's B Doubles	My partner will be _____
<input type="checkbox"/> Women's A Doubles	My partner will be _____
<input type="checkbox"/> Women's B Doubles	My partner will be _____
<input type="checkbox"/> Mixed A Doubles	My partner will be _____
<input type="checkbox"/> Mixed B Doubles	My partner will be _____
<input type="checkbox"/> Parent/Child A Doubles	My partner will be _____
<input type="checkbox"/> Parent/Child B Doubles	My partner will be _____
<input type="checkbox"/> Century Doubles	My partner will be _____ ages of partners add up to 100+ My age _____ My partner's age _____

Make checks payable to **MUNCIE TENNIS ASSOCIATION**

Mail to **TIM CLELAND, 2200 W. Audubon Drive, Muncie, IN 47304**