

	<p align="center">Bob Caples Memorial 3-Wall Tournament June 12th & 13th, 2010</p>	<p align="center"><i>3-wall</i> Handball The Perfect Sport <i>Most</i></p>
Sponsors		
Deadline	Entries should be received no later than:	Monday, June 7, 2010
Divisions	<p>Open Singles (PRIZES TBD)</p> <p>A/40's; 50+ Singles; 50+ "B" Singles 60+ Singles; B/C Singles Juniors (under 16) May play Fri or Sun.</p>	<p>Open Doubles (PRIZES TBD) Over 110 Doubles B/C Doubles</p> <p>(We reserve the right to combine divisions or change format, based on number of entries)</p>
Entry Fee	<p>Friend of Tournament Entry...\$100. Covers entry fees with a token of appreciation; otherwise, fees are:</p> <p>\$ 50.00 1st Event \$ 20.00 2nd Event (2 events only) <u>\$5 off for GCHA Members.</u> <u>College Students</u> \$ 30.00 1st Event (incl. GCHA membership) \$ 10.00 2nd Event <u>Juniors (under 16 years old)</u> \$ 15.00 (May need to play on Fri or Sun)</p>	<p><u>Make checks payable to: GCHA</u> (Greater Cincinnati Handball Association)</p> <p><u>Mail checks with entry to:</u> Bob Bardeau 330 Eastbury Dr. , Loveland, OH 45140</p> <p><u>Clip and mail entry form below:</u></p>
Guidelines	2 games to 21, 11 point tiebreaker Eye guards must be properly worn at all times	Using USHA Red Label ball. Losing team or player must supply a referee for the following match.
Location	Veterans' Park, Green Township 6231 Harrison Avenue Cincinnati, OH	I-74 (east or west) to Exit 11, Harrison, Rybolt Exit. Head UP HILL on Harrison Avenue. Parking entrance on right (at light, just past car dealership). About 1 mile from exit.
Hospitality	Lunch Saturday and Sunday at the courts.	Gatorade and water courtside. Fruit, snacks and drinks all weekend.
Awards	Tournament souvenirs for all entrants	Awards for 1st and 2nd place in all divisions.
Start Times	Play begins Saturday, June 12th at 8:00 a.m. Local entrants and Juniors may play Friday night if necessary.	For starting times and brackets, check GCHA.org on Thursday, June 10 th
Director	Bob Bardeau email: bardeau.bt@pg.com	Home phone: (513) 239-6219 Cell phone: (937) 750-0565

*****CAPLE'S ENTRY FORM*****

Name _____ Home Ph _____ Cell _____

Address _____ Age _____

Email address _____ Divsn. _____ Partner _____

The undersigned hereby assumes all responsibility for, and all risk of damage or injury that might occur or arise from participation in the above event. The undersigned specifically releases and discharges the sponsors, organizers, Green Township, their employees, and agents from any and all such claims that may arise from same.

Signature _____ Date _____