

LICENSEE / ODED ATOD NAME:

## 2017 RALLY 8 BALL SINGLES REGISTRATION FORM

LICENISEE ID #

PLAYERS / LICENSEES: Please complete this form and submit with the payment to be received by FEB 27th. No Entries will be accepted after this date/midnight, no exceptions or sign-ups will be taken at this event. All Checks should be submitted, with this form made payable to TAP, LLC and sent to P.O. Box 368, Dauphin, PA 17018. NO FAXES PLEASE. Email kelly@tapleague.com with any questions.

PLAYERS MUST HAVE A CURRENT TAP MEMBERSHIP CARD WITH THEM, OR THEY WILL NOT BE ALLOWED TO PLAY. ID CAN BE VERIFIED BY THE OPPONENTS IN YOUR EVENT.

Fee is \$125 per PLAYER for ALL 5 Handicap Brackets. Once handicaps determined, player will be put in the singles bracket handicap system determines. Email will be sent and notice published. Must meet all national qualifications and requirements, please see rule book. Singles Events are Round Robin to Single Elimination. Players must have 6 matches played from NOV 7<sup>th</sup> to FEB 27<sup>th</sup>. SINGLES EVENT WILL START FRIDAY NIGHT TO APPROX 1AM AND CONTINUE SATURDAY PM TO APPROX 1AM. EVENTS WILL BE ALL DAY SUNDAY TO APPROX 7 PM ALL CAPS. Once the total number of participants in each board is determined, Groupings and Single Elimination Brackets can be done and schedule by handicap determined.

LICENSEE / OFERATOR NAME.						LICENSEE	LICENSEE ID #	
LICENSEE TERRITORY/ LEAGUE NAME:						STATE/PROV.		
PLAYER NAME:	•							
PLAYER EMAIL:								
PLAYER PHONE: SMART PHONE/TABLET? Y or N TYPE:								
8-BALL SINGLES HANDICAP BRACKET ( PLEASE CIRCLE)								
FEE \$125.00	HANDICAP 2/3	HANDICAP 4	HANDICAF 5		HANDICAP 6	HANDICAP 7		
MEMBER / PLAYER ID #:				HANDICAP LEVEL:				
			•					
ARE YOU IN THE TEAM EVENT ALSO? IF YES IS IT ONE TEAM OR TWO (PLEASE CIRCLE)								
ONE TEAM				TWO TEAMS				
TEAM NAMES:								
THE BELOW INFORMATION IS FOR OFFICE USE ONLY:								