



Match Play for



8th Annual Tournament Fundraiser September 14 - 15, 2019



Norton Pines Athletic Club
1350 Judson Road Spring
Spring Lake, MI 49456



Questions? Contact Gail Hall at gHall@mieda.org or at 616-236-3156, or Nate Kunnen at nkunnen@nortonpines.com

EVENTS

Men's Doubles & Women's Doubles — Saturday • Mixed Doubles — Sunday
6.0, 7.0, 8.0, and 9.0 Combined *Players must be 18 years of age or a high school graduate.*

MATCH TIMES

Play will begin on **Saturday, September 14, at 9:00 am**. All players must be available to play at that time. Depending on draw sizes, local players may begin Friday evening (September 13). First match times will be available on Friday, the 13th, at 12 p.m. Players are responsible for investigating their start times by calling Norton Pines Athletic Club at (231) 865-6911.

AWARDS

Gifts will be presented to the winners and finalists of each main draw flight, as well as winners of each consolation flight. T-shirts will be given to all participants. Please mark shirt sizes on the entry form.

REFRESHMENTS

There will be a continental breakfast served on Saturday and Sunday mornings. (available for players entered in the tournament only)

SOCIAL on Saturday

Our social & silent auction is from 4-6 pm Saturday. Tickets are free to tournament participants and \$25 for guests. There will not be an exhibition match this year in order to keep the courts open for tournament play.



See Back Side for Details



ENTRY FORM (See Reverse Side for Further Details)

Please Print



First _____ Last _____

Address _____ City _____ State _____ Zip Code _____

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Home Phone _____ Cell Phone _____ Email _____

Match Play for
MiEDA
Michigan Eating Disorders Alliance
September 15 - 16, 2018

Event(s) *Limited to Two Per Person*

Event / Division	6.0 Combined Name of Partner	7.0 Combined Name of Partner	8.0 Combined Name of Partner	9.0 Combined Name of Partner
Men's Doubles				
Women's Doubles				
Mixed Doubles				



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September 14 - 15, 2019

Tournament Registration and Information

DEADLINE **Wednesday, September 4**, Divisions are limited; enter as soon as possible.

FEEES \$45 per player and \$30 additional per player if entering a second event (limit of two events per person)

PAYMENT METHOD Checks & Credit Cards Accepted Please make checks payable to "MiEDA"



SUBMITTING

Mail
Telephone
Online at www.mieda.org
or via www.usta.com

Name Address City, State, Zip	
MiEDA 1001 Parchment Dr. SE, Grand Rapids, MI 49456	

- **MAIL: Check or Credit Card** required.
 (Checks payable to "MiEDA". As always, please do not mail cash.)
- **TELEPHONE** entries will be accepted with a **Credit Card** payment. Call Norton Pines: **231-865-6911**, and ask for **Nate**.

RULES & REGS

USTA rules will be in effect. Scoring for each match will consist of two full sets. In the event of a third set, the **match tie-break** will be used (first to 10 by a margin of 2).

PAYMENT POLICY

Payment must be made at time of registration. In the event that a team has to cancel, notification must be made to Norton Pines by 5:00 pm on 09/03 (Tuesday) in order for a refund to be issued. After this deadline, refunds will not be issued.

QUESTIONS?



Contact Gail Hall
ghall@mieda.org
616-236-3156

or

Nate Kunnen
nkunnen@nortonpines.com
231-865-6911

ENTRY FORM (See Reverse Side for Further Details)

ENTRY FEES

	Player #1	Partner
1 Event – Initial Entry Fee	<input type="checkbox"/> \$45	<input type="checkbox"/> \$45
2 Events – Second Entry (Additional)	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30

TOTAL ENTRY FEES:

\$

Social – Additional (Non Player) Ticket(s), \$25 Each: _____ (Qty.)

Donation to MiEDA: optional; very much appreciated!..... \$ _____

TOTAL AMOUNT (Entry + Addtnl. T-Shirts + Social + Donation) \$ _____

METHOD(S) OF PAYMENT

Check Visa Mastercard Discover *Cash

CREDIT CARD NUMBER _____ EXP DATE _____ SECURITY CODE _____

NAME ON CARD—PLEASE PRINT _____

Signature: _____

*Email for Receipt: _____

Please Print

T-SHIRT Selection

Shirts will be **given to each participant.** (Please check sizes)



Your Size: S M L XL XXL

Women's Partner's Size: S M L XL XXL

Men's Partner's Size: S M L XL XXL

Additional shirts available for purchase (\$10)

Quantity: _____ Shirts @ \$10 Each = \$ _____

Size(s): _____

FOR OFFICE USE ONLY

\$ _____ / / 2019

AMOUNT PAID

DATE RECD

RECD BY

Yes, Receipt Issued