

2008 Cincinnati Open 2 Star Tournament

October 25, 2008

Registration Deadline:
Must Be Received by 10/20/2008

Tournament Director - Pierce Scott-
tblten@aol.com 513-238-1503

Ratings Cutoff: 10/2/2008

Tournament Referee: Greg Thompson

Over 1600 3 Groups of 9 players in each group. Fee: \$35 Start: 3:00

Group	1 st	2 nd	3 rd
Group A	\$500	\$250	\$100
Group B	\$170	\$90	\$70
Group C	\$120	\$70	\$50

41-Point Handicap Single Elimination. 32 people max. Fee: \$15 Start
1:30

1 st	2 nd	3 rd	4 th
\$100	\$50	T-Shirt	T-Shirt

U1600 3 Groups of 9 players in each group. Fee: \$35 Start: 9:00

Group	1 st	2 nd	3 rd
Group D	\$110	\$70	\$40
Group E	\$100	\$50	\$25
Group F	\$80	\$40	\$15

Tables: 10 Donic Persson 25

Balls: White Butterfly

Sponsored By: Clifton Chiropractic & Newport Chiropractic

Facility:

University of Cincinnati's Campus Rec. Center
2820 Bearcat Way
Cincinnati, OH

You have to park on the garage on the right
(Woodside). The tournament is on the level "0".

Director reserves the right to modify, combine and cancel events, limit entries, and assign temporary ratings for unrated players. Rackets must have USATT approved rubber. Only USATT approved equipment may be used. All USATT rules will be enforced. Unrated players are not eligible to advance in rated events.

Committee: Pierce Scott, Don Moler, Barb Curtis, John Monaco, Greg Thompson, Joyce Burnett, Perry Wilson

Over 1600 and U1600 have a limit of 27 people. The 41 Point Handicap has a limit of 32 people. The match format is 3/5 except for the 41 Point Handicap which is 1 game to 41.

2008 Cincinnati Open
Entries Must Be Received By 10/20/2008

Circle Event(s) entering: U1600 Over 1600 41 Point Handicap

To Confirm Your Entry Has Been Received or to see who has entered go to cincytt.org

By entering this tournament, I agree to abide by all USATT regulations and all tournament officials' decisions. I accept full responsibility for my participation and relieve the tournament location, USATT, sponsoring club and its organizers, staff, and sponsors of any liability resulting from injury to myself or damage to my property.

Name: _____

Event Fees: _____

Address: _____

USATT Mem. _____

City: _____

Adult (1yr): \$40

Junior/College: \$20

State: _____ Zip: _____

Rating Fee: + \$5.00

Phone: _____ DOB: _____

Total Amount _____

USATT # _____ Expires: _____

Only paid entries will be Accepted.

Rating: _____ Homeclub: _____

Email Address: _____

Mail Entries To:

Pierce Scott

7655 Coldstream Woods Dr.

Cincinnati, OH 45255

Signature of player (or Parent if under age 18):

_____ Date: _____

Checks Payable:

Cincinnati Table Tennis Club