



# Easter Silver Tournament

April 14 - 15, 2012

Boys and Girls from U11 to U19

## VIDEO RECORDING & ANALYSIS

We are offering participants the option to record their own matches at our tournaments. You can also elect to receive post-match video analysis from our Head Pro. The costs for your DVD are \$49 per match and an additional \$49 for match analysis. Please let us know if you are interested in any of these options.

**LOCATION** Pyramid Squash Club located at 30 Elm St in Tuckahoe, NY 10707

Visit [www.pyramidsquash.com](http://www.pyramidsquash.com), CALL (914) 961-7529, FAX (914) 961- 7520 or EMAIL [info@pyramidsquash.com](mailto:info@pyramidsquash.com) for further information.

**TOURNAMENT DIRECTOR** is Katja Amir (cell: 914.826.3499)

**PLAYER PACKAGE** Every participant will receive an entry gift, breakfast, and lunch on Saturday and Sunday. Every player is guaranteed 3 scheduled matches and there will be trophies for all winners.

**PLAYER OBLIGATIONS** Both winner and loser must referee the next match. Players must be available for the entire weekend (from Saturday 8:00 AM – Sunday 6:00 PM). Although we try to avoid Friday matches as much as we can, there might be a possibility that we have to start on Friday afternoon! No allowance can be made for conflicting events.

**START TIMES** will be posted on [www.pyramidsquash.com](http://www.pyramidsquash.com)'s tournament page and on [www.ussquash.com](http://www.ussquash.com). They will be available after 5:00pm on the Wednesday before the tournament.

**ENTRY DEADLINE** is April 6, 2012. No refunds will be made after this date.

**ENTRY FEE** is \$85 and a US SQUASH membership is required to participate.

Please send the entry form and check (if paying by check) to the PYRAMID SQUASH CLUB.

**LATE ENTRY** A \$20 late fee will be charged if signing up after the deadline. Entry form and payment (**credit cards only**) must be submitted before tournament date to allow for participation.

Child 1: Name \_\_\_\_\_ Division (please circle one) Boy / Girl U11 U13 U15 U17 U19

DOB \_\_\_\_\_ Age at last day of tournament \_\_\_\_\_ US Squash# \_\_\_\_\_ Membership expir. Date \_\_\_\_\_

Child 2: Name \_\_\_\_\_ Division (please circle one) Boy / Girl U11 U13 U15 U17 U19

DOB \_\_\_\_\_ Age at last day of tournament \_\_\_\_\_ US Squash# \_\_\_\_\_ Membership expir. Date \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Tel. \_\_\_\_\_ EMAIL \_\_\_\_\_

Cell Phone(s) where you can be reached during the tournament \_\_\_\_\_

Yes, I want video recording  (Please inform us ahead of time for which matches you would like to use our services) No, thank you

Paid by: Check  Credit Card  Number \_\_\_\_\_ exp. Date \_\_\_\_\_ / \_\_\_\_\_

### WAIVER:

*With my signature I agree to release and hold harmless the PYRAMID SQUASH, Inc and 30 Elm St LLC and the committee from all liabilities that may arise as a result of injury to my child or others and from claims and demands for damages to property, resulting from, and participating in, traveling to and from Pyramid Squash Club. My child is in good health and may participate in normal program activities unless I specify otherwise on this form. I consent that photographs and videos taken of my child are the property of Pyramid Squash, Inc and may be reproduced and publicized as the Pyramid Squash desires, at any time, free of claims on my part.*

Signature of Parent/Guardian \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Apr 14 - 15  
Easter Silver