



Greenville County Smash Pickleball Tournament
Thursday-Sunday, October 27-30, 2022
(Rain date - Sunday, October 30th)
Southside Park | 417 Baldwin Road | Simpsonville, SC 29680

ENTRY FORM

ADAPTIVE CLINIC – \$0
ADAPTIVE, YOUTH divisions – \$19
MIXED, WOMEN’S, MEN’S divisions – One Event: \$45 | Two Events: \$55

Player’s Name: _____

A. MEN’s / WOMEN’s Partner First and Last Name: _____

Partner Email: _____ Partner Phone: () _____

B. MIXED Partner First and Last Name: _____

Partner Email: _____ Partner Phone: () _____

C. YOUTH Partner First and Last Name: _____

Partner Email: _____ Partner Phone: () _____

D. ADAPTIVE Partner First and Last Name: _____

Partner Email: _____ Partner Phone: () _____

NOTE: You are required to list a partner at time of registration. Your partner will also be required to register & pay the registration fee before your team is added to the tournament schedule. *We no longer accept applications without a partner listed.* If you are registering for the Adaptive division and do not have a partner, email Sandy Halkett at sandyhalkett@yahoo.com with your name & skill level to help connect you with a partner. Youth are only permitted to play in Youth and/or Adaptive divisions. Adaptive clinic participants will not receive a shirt.

Address: _____

City: _____ **State:** _____ **Zip:** _____

Primary Phone: () _____ **Secondary Phone:** () _____

Email: _____

Date of Birth: ____/____/____ **Shirt Size:** YS YM YL AS AM AL AXL AXXL AXXXL

Emergency Contact: _____ **Primary Phone:** () _____

Other accommodations needed?: _____

Check the boxes for division & skill level that apply for the event(s) you wish to register:

THURSDAY 10.27.22

EVENT: <input checked="" type="checkbox"/>	ADAPTIVE CLINIC	SKILL LEVEL: <input checked="" type="checkbox"/>	Never-Ever
			Beginner
			Int/Adv

EVENT: <input checked="" type="checkbox"/>	ADAPTIVE DOUBLES	PARTNER DESIGNATION: <input checked="" type="checkbox"/>	Adaptive	SKILL LEVEL: <input checked="" type="checkbox"/>	2.0-3.0
			Unified		3.5+

NOTE: Adaptive divisions must play in the skill division of the higher skill level of the two players. Unified partners can be either youth or adult age.

EVENT: <input checked="" type="checkbox"/>	YOUTH DOUBLES	AGE DIVISION: <input checked="" type="checkbox"/>	8-10	SKILL LEVEL: <input checked="" type="checkbox"/>	Beginner
			11-13		Int/Adv
			14-17		

NOTE: Youth divisions must play in the age division of the older player. Player age groups are calculated based on their age on December 31, 2022. Teams must also play in the higher skill level of the two players.

FRIDAY 10.28.22

EVENT: <input checked="" type="checkbox"/>	MIXED ADULT DOUBLES	AGE DIVISION: <input checked="" type="checkbox"/>	18+	SKILL LEVEL: <input checked="" type="checkbox"/>	2.5-3.0
			50+		3.5
			65+		4.0
					4.5+

NOTE: Mixed divisions must play in the age division of the younger partner. Player age groups are calculated based on their age on December 31, 2022. Teams must also play in the higher skill level of the two players.

SATURDAY 10.29.22

EVENT: <input checked="" type="checkbox"/>	WOMEN'S ADULT DOUBLES	AGE DIVISION: <input checked="" type="checkbox"/>	18+	SKILL LEVEL: <input checked="" type="checkbox"/>	2.5-3.0
	MEN'S ADULT DOUBLES		50+		3.5
			65+		4.0
					4.5+

NOTE: Women's and Men's divisions must play in the age division of the younger partner. Player age groups are calculated based on their age on December 31, 2022. Teams must also play in the higher skill level of the two players.

ADAPTIVE clinic: _____ \$0

MIXED, WOMEN'S, or MEN'S Adult One Event: _____ \$45.00

Adaptive division: _____ \$19.00

MIXED, WOMEN'S, or MEN'S Adult Two Events: _____ \$55.00

YOUTH: _____ \$19.00

Please complete the entry form, credit card form, & waivers and mail completed forms to:

Greenville County Smash Pickleball Tournament | 4806 Old Spartanburg Road | Taylors, SC 29687 | ATTN: Jeff Poole

NOTE: Registration period is August 1 – October 7, 2022 for all divisions. Registration period is August 1–October 21, 2022 for adaptive clinic. Entry forms must be received during the registration period. Registration closes once the daily cap has been reached or the registration end-date, whichever comes first. Barring injury, sickness, or other unforeseen emergency circumstances, changes to a team's registration will not be accepted beyond October 7. Cancellation deadline is also October 7. For *MIXED, WOMEN'S, or MEN'S* divisions – if you registered for 1 division and need to cancel or are registered for 2 divisions and need to cancel both, a refund will be issued minus a \$15 administrative fee. If you are registered for 2 divisions and are cancelling 1 division, no refund will be issued. No refunds will be issued after October 7. For *YOUTH or ADAPTIVE* divisions – if you registered and need to cancel, a refund will be issued minus a \$15 administrative fee.

If you require assistance, contact Jeff Poole at 864-467-3320 or by email jpoole@greenvillecounty.org. Register online at www.greenvillerec.com.



Office Use Only

Four empty rectangular boxes for office use.

Date: _____
By: _____

**For security and protection of your financial information
RETURN BY US MAIL OR HAND DELIVER ONLY**

Greenville County Parks, Recreation, & Tourism
4806 Old Spartanburg Road
Taylors, SC 29687
(864) 288-6470

Credit/Debit Card Payment Authorization Form

Customer Information

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Phone number: _____ Email address _____

Payment Information

I authorize Greenville County Parks, Recreation, & Tourism to automatically charge my credit/debit card on file for fees incurred at time of registration. I agree that I will pay for these charges in accordance with the issuing bank cardholders agreement.

Cardholder's Signature

Date:

Credit Card Information

Please print.

Cardholder's Name:

Credit Card Billing Zip Code (required)

_____ (as it appears on the credit card)

_____ (from credit card billing address)

Destroyed After System Entry

Credit card number:

Expires:

CW Code:

ASSUMPTION OF RISK AND WAIVER OF LIABILITY (TO INCLUDE CORONAVIRUS/COVID 19) RELEASE FORM

PROGRAMMING ACTIVITIES – PLEASE READ CAREFULLY

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

The County of Greenville, acting through its Department of Parks, Recreation & Tourism (“GCPRT”) has put in place preventative measures to reduce the spread of COVID-19; however, the County of Greenville, acting through GCPRT, cannot guarantee that you will not become infected with COVID-19. Further, attending GCPRT programming activities could increase your risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending GCPRT programming activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, and/or negligence of myself and others, including, but not limited to, GCPRT employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance and/or participation in GCPRT programming activities (“Claims”).

This is to certify that I have read and understand the provisions of this Assumption of Risk and Waiver of Liability (To Include Coronavirus/COVID 19) Release including the risks of the activity and my responsibilities for adhering to the rules and regulations. Furthermore, I understand and accept these risks and responsibilities. I release and agree to indemnify and hold harmless the County of Greenville, GCPRT, their officers, directors, instructors, agents, employees, representatives, and volunteers from any and all liabilities incident to my involvement or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

PHOTO RELEASE

Furthermore, I give my permission to have photos and/or video recordings taken of me for publicity purposes during GCPRT programming activities. I hereby grant and convey unto the County of Greenville and GCPRT all rights, title and interest in any and all photographic images and video or audio recordings made by the County of Greenville and GCPRT during my participation in GCPRT programming activities.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. I have entered into this document on the basis of my own information and not in reliance upon representations of the County of Greenville, its Department of Parks, Recreation & Tourism, their employees, agents, and representatives.

I further understand that this document contains the entire agreement and no oral or written agreements limiting or modifying the effect of the terms of this document exist.

I further agree that if any part of this agreement is held to be invalid or unenforceable for any reason, the balance of the agreement remains valid and enforceable.

I have read and understood this document and I agree to be bound by its terms.

Participant’s Signature: _____

Participant’s Printed Name: _____

Date: _____

Program Activity: _____

Program Activity Location: _____