

2016 Serve2Cure 6th Annual Charity Tennis Tournament

Mt. Lebanon, PA **Serve2Cure.org** **September 16-17**

Events: Men's Doubles, Women's Doubles & Mixed Doubles

Hosted by Mt Lebanon Tennis Center, 900 Cedar Blvd, Pittsburgh, PA 15228

Entry Fees/Registration:

\$75 per player if paid by cash or check, \$77 if paid by credit/debit card (approximately \$55 is tax deductible; the tournament benefits Matt's Media 4 Kids with Cancer). **\$40 for Juniors (Age 18 and younger).**

No add scoring. Two match guarantee. FEE IS PER PERSON/PER EVENT.

Deadline: *Wednesday, September 7, 2016.* **Draws:** emailed to players by 9 p.m. Tuesday, September 13th.

Serve2Cure contact person: Margaret Izzo, izzo11@verizon.net

2016 Serve2Cure Charity Tennis Tournament, Mt. Lebanon, PA

Name: _____ **Address:** _____

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

Cell Phone: _____ **Email:** _____

Circle your Shirt Size: S M L XL

Please circle no more than two of our four events (circle your USTA division)

1. **Women's Doubles:** 3.0 3.5 4.0 **On September 16th from 9 a.m-3 p.m.**
 2. **Women's Doubles:** 3.0 3.5 4.0 **On September 17th from 8 a.m.-5 p.m.**
 3. **Mixed Doubles:** 7.0 8.0 9.0 **On September 17th from 8 a.m.-5 p.m.**
 4. **Men's Doubles:** 3.0 3.5 4.0 **On September 17th from 8 a.m.-5 p.m.**
- Juniors may play in the adult divisions. The matches are not USTA sanctioned.**

Partner #1 _____ **Partner #2** _____

We will help you find a partner if you do not have one.

Enclosed is my check for \$ _____. Please make checks payable to **Serve2Cure**.
Please send checks to Serve2Cure c/o Registration, Margaret Izzo, 50 Woodhaven Drive, Mt. Lebanon, PA 15228. *PLEASE CALL 412-343-3411 (the Mt. Lebanon Tennis Center) TO REGISTER BY PHONE (Visa/MasterCard Only)* \$2 processing fee for all CC charges

I hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Mt. Lebanon Tennis Center, it's agents, successors, and assigns, including Serve2Cure officers and volunteers, for any and all injuries which may be suffered by me in connection with my participation in this tournament.

Signature: _____ Date: _____