



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Spring Pickleball Tournament

Register online on www.kandiymca.org you will be asked to set up an account to register online. All matches will be the best 2 out of 3 games to 11 points, win by 2 points. Tournament will be played at the Kandiyohi County Area Family YMCA Gymnasium Saturday, March 14th with Men/Women's doubles starting at 8:00am, and mixed doubles starting at 12:00pm. Registration deadline is March 8th.

Men's/Women's -Warm up/Check-in At 7:00am-7:50am ■

Bracket Play Starts At 8:00am

Men's Doubles Beginner (1.0-3.0 Skill Rating)

Men's Doubles Advance (3.0-5.5+ Skill Rating)

Bracket Play Starts At 8:00am

Women's Doubles Beginner (1.0-3.0 Skill Rating)

Women's Doubles Advance (3.0-5.5+ Skill Rating)

Men/Women's Doubles Registration Cost

(Per Person)

Members \$20.00

Non-Members \$30.00

Prizes:

1st Place– Paddles

2nd Place– Pickleball

Mixed Doubles Registration Cost

(Per Person):

Members \$20.00

Non-Members \$30.00

Prizes:

1st Place– Used pop up pickleball net

2nd Place– Paddles

Cancellation Policy

We understand that everyone has busy lives, therefore we will be more than willing to make refunds. Please remember these guidelines when making changes. Cancellations made 7 days prior to the start date of the lesson will receive the registration fee minus a \$15 processing fee. If cancellations are made **less than 7 days prior** to the scheduled start date No refunds will be given. If the program is cancelled due to low enrollment the full registration fee will be refunded.

Pickleball Tournament Registration

Please Check One Option:

- Men's Doubles Beginner (1.0-3.0 Skill Rating)
- Men's Doubles Advance (3.0-5.5+ Skill Rating)
- Women's Doubles Beginner (1.0-3.0 Skill Rating)
- Women's Doubles Advance (3.0-5.5+ Skill Rating)
- Mixed Doubles Beginner (1.0-3.0 Skill Rating)
- Mixed Doubles Advance (3.0-5.5+ Skill Rating)

Men's/Women's Partner _____

Shirt Size

Mixed Doubles Partner _____

(Must Return Registration by March 1 to receive a Shirt)

SM M L XL XXL 3X

Player Information

First Name*

Last Name*

Middle Initial*

Home Phone*

Cell Phone*

Work Phone*

Family Email*

Mailing Address*

City*

State*

Zip*

Emergency Contact Name*

Emergency Contact Number*

_____ I have attached a check or cash for the selected session.

_____ I would like to have the registration fee auto debited from my YMCA membership account.

Signature _____ Date _____ Staff Initials _____

By signing, I authorize the YMCA to use pictures of me for Promotional Purposes.

***Required to Register**