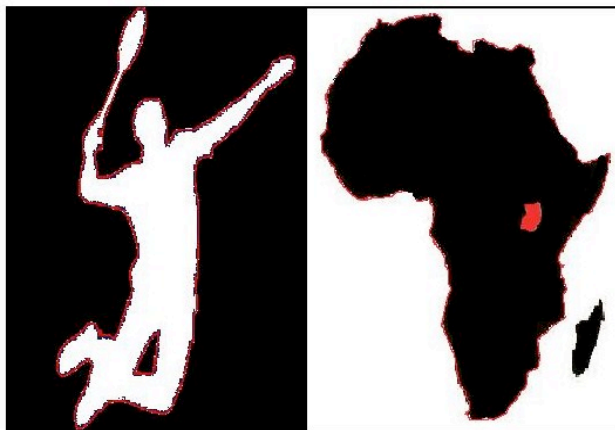


TLFU Tournament



Date: June 9th – 10th, 2012
 Location: *Loch Raven Badminton Club at NERRC*
 7501 Oakleigh Road
 Baltimore, MD 21234
 Entry Deadline: June 2nd
 USAB Membership: Not Required
 Entry Fee: \$25/first, \$10 ea. additional

Events:

High/Middle School Events:

Boy's Singles Girl's Singles Boys' Doubles Girls' Doubles Mixed Doubles

Adult Events:

Men's Singles	Women's Singles	Men's Doubles	Women's Doubles
Mixed Doubles	Mixed up Senior Doubles* (years 40 or older as of 6/9/12)		

*If the number of entries is significant. Mixed up Senior Doubles will include Senior MD, WD and XD.

Trophies for each event! We will have prizes for both winners and finalists.

*****Each team is guaranteed two matches. *****

Tentative Schedule

	Saturday	Sunday
8:00	Warm up starts	Warm up starts
8:30-12:30	Women's Singles and men's Singles	HS events
12:30-16:30	Women's Doubles and Men's Doubles	
16:30-20:30	Mixed Doubles and Mixed up Senior Doubles*	

* Mixed up Senior Doubles can be MD, WD or XD pair. Since Mixed up Senior Doubles and Mixed Doubles will be at the same time, please just pick one to sign up.

Please direct questions or concerns to Mingsheng (Billy) Wu at (443) – 370 – 4282

Entry Form

Name: _____

Address: _____

City: _____

State: _____ **Zip Code** _____

Cell Phone: _____ **Email:** _____

Gender: M or F

Attending High/Middle School School: Y N (Please circle one).

Events:

Event	Check	Partner's name
HS/MS Girl's Singles		N/A
HS/MS Boy's Singles		N/A
HS/MS Girl's Doubles		
HS/MS Boy's Doubles		
HS/MS Mixed Doubles		
Women's Singles		N/A
Men's Singles		N/A
Women's Doubles		
Men's Doubles		
Mixed Doubles		
Mixed up Senior Doubles		

Entry Fees

First Event: _____ **\$25**

Additional Event(s): _____ **X\$10 each event**

Additional Donation: _____

Total Fee: _____

WAIVER AND RELEASE OF LIABILITY

THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS PERMITTED TO TAKE PART IN EVENT SESSIONS. BY SIGNING THIS AGREEMENT, THE PARTICIPANT AFFIRMS HAVING READ IT.

I hereby confirm the participant is in good health and able to participate in this activity. I acknowledge that the activity may involve risk and danger of bodily injury or death. I fully accept and acknowledge the activity may involve risk, and I hereby assume the risk and responsibility for all dangers and risks associated with the participant in the activity. I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises and their respective agents, Personal representatives, heirs, employees, contractors, successors and assigns (each of "Activity representative" and collectively "activity representatives), shall not be responsible or liable in any regard or manner for any and all property damage or bodily injury (including serious physical injury or even death) incurred by the participant or any party related thereto as a result of his/her participation in the activity. I have read, fully understand, and hereby freely sign, approve of, and agree to the terms of this registration form. I hereby unconditionally release, discharge, covenant not to sue, waive my rights and remedies, and agree to hold harmless the activity representatives from any and all claims, costs, demands, losses, damages, or expenses associated with, in whole or in part, participant's involvement with the activity. I certify all answers and information provided on this registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council in writing if any information provided in this registration form is incorrect or changes through the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport or United States Visa to the activity representative for review, if requested, at the time I submit this Registration Form to the recreation council.

Name (Please Print) _____

Signed _____

Guardian or Parent signature (if minor) _____

Date: _____

Please attach this form to an email and send to:

TrueLoveForUganda@live.com

And send your check, payable to Mingsheng Wu to:

6817 Queens Ferry Rd

Baltimore, MD 21239

OR

Print and send this form along with your check to the above address.

Thank you!