

# 2017 SOUTHWEST REGIONAL CHAMPIONSHIPS ENTRY FORM



## PERSON SUBMITTING FORM *(Print or Type)*

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

INSTRUCTIONS	SCOTCH DOUBLES	START <sup>1</sup>	TEAM RATING LIMIT	RACE	ENTRY FEE (by Aug. 1)	ENTRY FEE (Aug. 2-29)	ENTRY FEE <sup>2</sup> (on-site)
	<b>STEP 1</b> Read the Division Formats & Eligibility document to ensure that you understand the structure and eligibility requirements of each division.	<input type="checkbox"/> <b>Scotch Doubles 8-Ball</b>					
<i>Gold Division</i>		<i>8/31 (Thu.) 7pm</i>	<i>1,100</i>	<i>4</i>	<i>\$80</i>	<i>\$100</i>	<i>\$120</i>
<b>SINGLES</b>		<b>START <sup>1</sup></b>	<b>COMPOSITION   (approx.)</b>	<b>RACE</b>	<b>ENTRY FEE   (by Aug. 1)</b>	<b>ENTRY FEE   (Aug. 2-29)</b>	<b>ENTRY FEE <sup>2</sup>   (on-site)</b>
<input type="checkbox"/> <b>Mixed 8-Ball Singles</b>							
	<i>Platinum Division</i>	<i>9/1 (Fri.) noon</i>	<i>Upper half of field</i>	<i>Var.</i>	<i>\$75</i>	<i>\$90</i>	<i>\$105</i>
	<i>Gold Division</i>	<i>9/1 (Fri.) noon</i>	<i>Lower half of field</i>	<i>Var.</i>	<i>\$75</i>	<i>\$90</i>	<i>\$105</i>
	<input type="checkbox"/> <b>Women's 8-Ball Singles</b>						
	<i>Gold Division</i>	<i>9/2 (Sat.) 9am</i>	<i>All</i>	<i>Var.</i>	<i>\$60</i>	<i>\$75</i>	<i>\$90</i>
<b>STEP 2</b> Place an "x" in the box of every division you wish to enter. You do not need to submit multiple entry forms.	<b>TEAMS</b>	<b>START <sup>1</sup></b>	<b>TEAM RATING LIMIT</b>	<b>RACE</b>	<b>ENTRY FEE   (by Aug. 1)</b>	<b>ENTRY FEE   (Aug. 2-29)</b>	<b>ENTRY FEE <sup>2</sup>   (on-site)</b>
	<b>Mixed 8-Ball Teams – 4 player</b>						
	<input type="checkbox"/> <i>Gold Division</i>	<i>9/3 (Sun.) 9am</i>	<i>2,200</i>	<i>10</i>	<i>\$200</i>	<i>\$240</i>	<i>\$280</i>
	<b>Women's 8-Ball Teams – 3-player</b>						
	<input type="checkbox"/> <i>Gold Division</i>	<i>9/3 (Sun.) 9am</i>	<i>1,500</i>	<i>7</i>	<i>\$150</i>	<i>\$180</i>	<i>\$210</i>
	1. Start times shown are the earliest possible start times. Actual start times may be later. Check the tournament brackets or ask the Tournament Director for actual times. 2. On-site entries must be received by 8pm on the day before the start date.						

### HOW TO SUBMIT FORM *(if not registering online)*

**Online Form Submission:** [www.playcsipool.com/2017-southwest-regional](http://www.playcsipool.com/2017-southwest-regional)  
**Email:** [entry@playcsipool.com](mailto:entry@playcsipool.com)  
**Fax:** 702-719-7667  
**Postal Mail:** CueSports International  
 2041 Pabco Road, Henderson, NV 89011

### IMPORTANT DATES

**July 27:** Last day for hotel discount  
**Aug. 1:** Last day for early entry discount  
**Aug. 8:** Last day for mailed entries  
**Aug. 15:** Last day for refund requests  
**Aug. 29:** Last day to register online

### PAYMENT METHOD *(US Funds Only)*

Check / Money Order *(postal mail only)*     Credit Card *(email, fax, or postal mail)* – Total Charge: \$ \_\_\_\_\_  
 Exact Name on Card: \_\_\_\_\_ Card #: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ Card Billing Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cardholder Signature: \_\_\_\_\_  
 Email *(for receipt)*: \_\_\_\_\_

### ACKNOWLEDGMENT STATEMENT

*I agree to abide by all rules & regulations implemented by CueSports International (CSI). CSI reserves the following rights and responsibilities: determine a player's eligibility, refuse entry to anyone for any reason, change field sizes, adjust ratings, display names and ratings online, change schedules & payouts based on, but not limited to, field sizes, inclement weather, acts of God, war, or terrorism. CSI and all representatives, agents, sponsors, and affiliates are released and to be held harmless of and from any injury, illness, losses, damages, liability, or expenses of any kind incurred by me, my heirs, or personal representatives either caused or alleged to be caused during or surrounding this event. Maximum liability, if any, is limited to reimbursement of the entry fee paid to that division. Disqualification from any CSI event shall result in forfeiture of any prize money or award won by that player or team, and possible suspension from future CSI produced events. CSI may add my email address to its email list. CSI may also use my photograph, image, likeness, or name for information, reporting, or promotional purposes via print, video, and other media.*

Player/Captain Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Typed or signed name here indicates signature on behalf of all players.)*

**STEP 3**  
 Complete the payment section and sign the acknowledgment statement.

**STEP 4**  
 If registering for team division(s), complete the applicable team roster(s) on page 2 and submit it with your entry form.

**STEP 5**  
 Book your room at We-Ko-Pa Resort! Call 480-789-5300 and use Group Code: **BCAPL2017**



**PLAYER INFORMATION (SINGLES & SCOTCH DOUBLES)** (Print or Type)

**Male** – current or past members ([find your Member ID](#), [find your Fargo Rating](#))

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State / Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Fargo Rating: \_\_\_\_\_

- BCAPL/USAPL League Member League Name: \_\_\_\_\_ League #: \_\_\_\_\_  
 ID: \_\_\_\_\_ Team Name Qualified on: \_\_\_\_\_ Weeks Played: \_\_\_\_\_
- Current CSI Member – CSI Member ID: \_\_\_\_\_
- Renew CSI Member (include \$25 membership fee) – CSI Member ID: \_\_\_\_\_
- New CSI Member (include [CSI Membership Application](#) & \$25 membership fee)

**Female** – current or past members ([find your Member ID](#), [find your Fargo Rating](#))

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State / Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Fargo Rating: \_\_\_\_\_

- BCAPL/USAPL League Member League Name: \_\_\_\_\_ League #: \_\_\_\_\_  
 ID: \_\_\_\_\_ Team Name Qualified on: \_\_\_\_\_ Weeks Played: \_\_\_\_\_
- Current CSI Member – CSI Member ID: \_\_\_\_\_
- Renew CSI Member (include \$25 membership fee) – CSI Member ID: \_\_\_\_\_
- New CSI Member (include [CSI Membership Application](#) & \$25 membership fee)

**SCOTCH DOUBLES TEAM RATING** (if applicable): \_\_\_\_\_

**TEAM ROSTER** (if applicable)

**LEAGUE INFO** (print or type)

League Name: \_\_\_\_\_ No. \_\_\_\_\_ League Operator: \_\_\_\_\_  
Division Name: \_\_\_\_\_ Division Number: \_\_\_\_\_

**TEAM NAME** (print or type): \_\_\_\_\_

Player	Name (First, Last)	Member ID (last 8 digits)	Fargo Rating	Weeks Played	Email Address	Phone
<b>Core Roster</b> (used to determine team rating)						
Core Player 1 (Capt. Y/N)						
Core Player 2						
Core Player 3						
Core Player 4						
<b>Do not use "Core Player 4" row for Women's Teams (3-player teams).</b>						

([find Member IDs](#), [find Fargo Ratings](#))

Team Rating (may not exceed the limit for the selected division)

**Substitutes** (a substitute must be rated the same or lower than the person being replaced)

Substitute 1 (Capt. Y/N)						
Substitute 2						