

2019 BCA POOL LEAGUE SOUTHERN BC CHAMPIONSHIPS ENTRY FORM

PERSON SUBMITTING FORM *(Print or Type)*

First Name: _____ MI: _____ Last Name: _____
 Email: _____ Phone: _____

INSTRUCTIONS	SCOTCH DOUBLES	START ¹	TEAM RATING LIMIT	RACE ²	ENTRY FEE <i>(by Jan 21)</i>	ENTRY FEE <i>(Jan 22-Feb 4)</i>	ENTRY FEE ³ <i>(on-site)</i>
STEP 1 Read the Tournament Guide to ensure that you understand the structure and eligibility requirements of each division.	<input type="checkbox"/> Scotch Doubles	2/10 (Sun.) 10am	1,100	Hdcp.	\$60	\$60	\$60
	SINGLES DIVISIONS						
	<input type="checkbox"/> 10-Ball Singles	2/7 (Thu.) 5pm	All	Hdcp.	\$60	\$75	\$90
	<input type="checkbox"/> 8-Ball Singles						
	<i>Gold Division</i>	2/8 (Fri.) 9am	Upper half of field	Hdcp.	\$60	\$75	\$90
	<i>Silver Division</i>	2/8 (Fri.) 9am	Lower half of field	Hdcp.	\$60	\$75	\$90
	<input type="checkbox"/> Junior 8-Ball Singles	2/10 (Sun.) 11am	All	Hdcp.	\$20	\$35	\$50
STEP 2 Place an "x" in the box of every division you wish to enter. You do not need to submit multiple entry forms.	TEAM DIVISIONS						
	<input type="checkbox"/> 8-Ball Teams						
	<input type="checkbox"/> <i>Gold Division</i>	2/9 (Sat.) 9am	4-player (2,200)	Hdcp.	\$300	\$340	\$380
	<input type="checkbox"/> <i>Silver Division</i>	2/9 (Sat.) 9am	4-player (2,000)	Hdcp.	\$200	\$240	\$280
	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. Races indicated as "Hdcp." will be handicapped based on FargoRate. Review the Tournament Guide for more information. 3. On-site entries must be received by 6pm on the day before the start date for the divisions. Cash only.						
STEP 3 Complete the payment section and sign the terms & conditions.	HOW TO SUBMIT FORM <i>(if not registering online)</i>				IMPORTANT DATES		
	Email: lance@playsipool.com Fax: 702-719-7667 Postal Mail: CueSports International 5177 Dallas Dr. Kamloops, BC V2C 4W3				Jan. 21: SAVE \$ Last day for early entry discount Jan. 28: Last day for mailed entries Jan. 28: Last day for refund requests Feb. 4: Last day to register online		
STEP 4 If registering for team division(s), complete the applicable team roster(s) on page 2 and submit it with your entry form.	PAYMENT METHOD <i>(Canadian Funds Only)</i>						
	<input type="checkbox"/> eTransfer (use email above) <input type="checkbox"/> Credit Card <i>(email, fax, or postal mail)</i> – Total Charge: \$ _____						
	Exact Name on Card: _____ Card #: _____						
	Exp. Date: _____ Card Billing Postal: _____ Phone: _____ Cardholder Signature: _____ Email <i>(for receipt)</i> : _____						
TERMS & CONDITIONS							
<i>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.</i>							
Player/Captain Signature: _____ Date: _____ <i>(Typed or signed name here indicates signature on behalf of all players.)</i>							
 							

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

Male ([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 or USAPL League Name: _____ League #: _____
Member ID: _____ Team Name Qualified on: _____ Weeks Played: _____

Female ([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 or USAPL League Name: _____ League #: _____
Member ID: _____ Team Name Qualified on: _____ Weeks Played: _____

SCOTCH DOUBLES TEAM RATING (*if applicable*): _____ (*may not exceed 1,100*)

TEAM ROSTER (*if applicable*)

LEAGUE INFO (*print or type*)

League Name: _____ No. _____ League Operator: _____
Division Name: _____ Division Number: _____

TEAM NAME (*print or type*): _____

Substitutions: The core roster is used to determine the total team rating. Teams may substitute players in any round but the substitute must be rated the same or lower than the person being replaced. The total team rating remains the same throughout the event as determined by the core roster.

Team	Name (First, Last)	Member ID <i>(last 8 digits)</i>	Fargo Rating	Weeks Played	Email Address	Phone
Core Roster (<i>used to determine team rating</i>)						
Core Player 1 <i>(Capt. Y/N)</i>						
Core Player 2						
Core Player 3						
Core Player 4						

([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 <i>(Capt. Y/N)</i>						
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