## 2020 CUESPORTS INTERNATIONAL ARIZONA STATE CHAMPIONSHIPS ENTRY FORM

DEDCON CLIRMIT	TING FORM (Print or Type)										
	TING FORM (PIIII of Type)		Last Nam	ne·							
INSTRUCTIONS	SCOTCH DOUBLES	START <sup>1</sup> (approx.)	TEAM MAX RATING	RACE <sup>2</sup>	EARLY ENTRY (by Dec 9)	LATE ENTRY (Dec 10-Jan 3)	ON-SITE <sup>3</sup> ENTRY				
STEP 1	☐ 8-Ball Scotch Doubles	1/8 (Wed) 6pm	1,100	R4 Hot	\$80	\$100	\$120				
Read the Player Guide to ensure that you understand the	SINGLES	START <sup>1</sup> (approx.)	COMPOSITION (approx.)	RACE <sup>2</sup>	EARLY ENTRY (by Dec 9)	LATE ENTRY (Dec 10-Jan 3)	ON-SITE <sup>3</sup> ENTRY				
	□ 9-Ball Singles	1/7 (Tue) 6pm	All	R6 Hot	\$75	\$90	\$105				
structure of the	☐ 10-Ball Singles	1/8 (Wed) 6pm	All	R5 Hot	\$75	\$90	\$105				
entire event.	☐ 8-Ball Singles										
	Platinum Division	1/9 (Thu) 6pm	Upper half of field	R5 Hot	\$75	\$90	\$105				
STEP 2 Place an "x" in the box of every division you wish to enter. You do	Gold Division	1/9 (Thu) 6pm	Lower half of field	R5 Hot	\$75	\$90	\$105				
	☐ Ladies 8-Ball Singles	1/9 (Thu) 6pm	All	R4 Hot	\$75	\$90	\$105				
	TEAMS	START <sup>1</sup> (approx.)	TEAM SIZE & MAX RATING	RACE <sup>2</sup>	ENTRY FEE (by Dec 9)	ENTRY FEE (Dec 10-Jan 3)	ON-SITE <sup>3</sup> ENTRY				
not need to	8-Ball Teams										
submit multiple entry forms.	□ Platinum Division	1/11 (Sat) 9am	3-player (1,800)	13	\$300	\$330	\$360				
	☐ Gold Division	1/11 (Sat) 9am	4-player (2,200)	R11 Hot	\$300	\$340	\$380				
STEP 3	Ladies 8-Ball Teams										
Complete the payment section and sign the Player Agreement.	☐ Gold Division	1/11 (Sat) 9am	3-player (1,500)	R9 Hot	\$240	\$270	\$300				
	<ol> <li>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.</li> <li>Races indicated as "R_ Hot" will be handicapped based on FargoRate. Review the Player Guide for more information about handicapping. Please note that the Platinum 8-Ball Teams division is non-handicapped, race to 13.</li> <li>On-site entries must be received by 6pm on the day before the start date for teams and by 2pm on the start day of the other divisions.</li> </ol>										
STEP 4	HOW TO SUBMIT FOR	<b>M</b> (online recommer	line recommended) IMPORTANT DATES								
If registering for team division(s), complete the applicable team roster(s) on page 2 and submit it	Online: <a href="www.playcsipool">www.playcsipool</a> Email: <a href="mailto:entry@playcsipool">entry@playcsipool</a> Fax: 702-719-7667 Postal Mail: CueSports In 2041 Pabco I	<u>.com</u>	Dec Dec	<ul><li>16: Last day for h</li><li>16: Last day for h</li><li>3: Last day for h</li></ul>	efund & change re	ersonal checks					
with your entry form.	PAYMENT METHOD (US Funds Only)										
	☐ Check / Money Order (postal mail only) ☐ Credit Card (email, fax, or postal mail) – Total Charge: \$										
STEP 5	Exact Name on Card:				Card #:						
Click here to	Exp. Date:										
book your room	Cardholder Signature: Email (for receipt):										
online at Casino Del Sol Resort or	Litiali (loi receipt)										
call	PLAYER AGREEMENT										
855-765-7829 and mention the 2020 AZ State Championships	I acknowledge that I have read and completely understand the Player Guide and/or all rules and regulations. 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 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 without limitation.										
	Player/Captain Signatu	re: (Typed or signed	d name here indicates sign	nature on beh	alf of all plavers.)	Date:					

rst Name:			MI:	Last Nar	me:	
mail:			Mailing Add	dress:		
ity:			State / Prov	·	Postal Code: _	
hone:			Date of Birtl	h:	Fargo Rating: _	
CAPL or USAI	PL League Name:				_	League #:
1ember ID:	Tea	m Name Qualified or	1:			Weeks Played:
layer 2 ( <u>find y</u>	your Member ID, find your Farg	o Rating)				
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CAPL or USAI	PL League Name:					League #:
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Substitute substitute throughout throughout the Core Roster (Core Player 1 Capt. Y/N) Core Player 2 Core Player 3	(print or type):  (ions: The core roster is used the must be rated the same or but the event as determined  Name (First, Last)  used to determine team rating)	to determine the t lower than the per by the core roster.  Member ID (last 8 digits)	Fargo Rating	Tating. Teams replaced. The  Weeks Played  Played  Played	may substitute players in total team rating remain	Phone  Output  Description:  Output  Description:  Descrip
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