

2021 CSI OKLAHOMA STATE CHAMPIONSHIPS ENTRY FORM

PERSON SUBMITTING FORM (Print or Type)

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

| INSTRUCTIONS | SCOTCH DOUBLES | START ¹ | TEAM MAX RATING | RACE | EARLY ENTRY (by Oct 4) | LATE ENTRY (Oct 5-27) | ON-SITE ³ ENTRY |
|---|---|--------------------|-----------------------------|---|------------------------|-----------------------|----------------------------|
| STEP 1 Read the Player Guide to ensure you understand the structure and eligibility requirements of each division. | <input type="checkbox"/> 8-Ball Scotch Doubles | 11/2 (Tue) 6pm | 1,100 | R4 Hot | \$120 | \$140 | \$160 |
| | SINGLES | START ¹ | SPLIT (approx) | RACE | EARLY ENTRY (by Oct 4) | LATE ENTRY (Oct 5-27) | ON-SITE ³ ENTRY |
| | <input type="checkbox"/> 10-Ball Singles | 11/3 (Wed) 9am | All | R5 Hot | \$100 | \$120 | \$140 |
| | <input type="checkbox"/> 8-Ball Singles | | | | | | |
| | Platinum Division | 11/4 (Thu) 9am | Upper 50% | R5 Hot | \$100 | \$120 | \$140 |
| Gold Division | 11/4 (Thu) 9am | Lower 50% | R5 Hot | \$100 | \$120 | \$140 | |
| <input type="checkbox"/> Ladies 8-Ball Singles | 11/4 (Thu) 9am | All | R4 Hot | \$100 | \$120 | \$140 | |
| STEP 2 Place an "X" in the box of every division you wish to enter. You do not need to submit multiple entry forms. | TEAMS (CSI Group Play format) | START ¹ | SPLIT ⁴ (approx) | RACE ² | EARLY ENTRY (by Oct 4) | LATE ENTRY (Oct 5-27) | ON-SITE ENTRY |
| | <input type="checkbox"/> 8-Ball Teams (5-player teams / 2,750 max rating) | | | | | | |
| | Platinum Division ⁴ | 11/5 (Fri) 6pm | Upper 50% | 15 / R11 | \$400 | \$450 | N/A |
| | Gold Division ⁴ | 11/5 (Fri) 6pm | Lower 50% | 15 / R11 | \$400 | \$450 | N/A |
| | <input type="checkbox"/> Ladies 8-Ball Teams (3-player teams / 1,350 max rating) | | | | | | |
| Ladies Division | 11/5 (Fri) 6pm | All | 9 / R7 | \$240 | \$270 | N/A | |
| STEP 3 Complete the payment section and sign the player agreement. | 1. Start times shown are the earliest possible start times. Actual start times may be later. Check the tournament brackets for actual times. 2. The first number is the total number of games per match that will be played between opposing teams in the group round robin stage (Stage 1). The second number is the handicapped race that will be played in the final elimination bracket (Stage 2). Races indicated as R"x" will be handicapped based on the specific FargoRate Hot race chart. Please review the Player Guide for more information. 3. On-site entries must be received by at least four (4) hours prior to the division start or 6pm the day prior for am start times. 4. If the total number of 8-Ball Teams does not reach 60 teams, all teams may compete in one division. | | | | | | |
| | 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 (US Currency Only) | | | | | | |
| | <input type="checkbox"/> Check / Money Order (postal mail only) <input type="checkbox"/> 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): _____ | | | | | | |
| STEP 5 Reserve your room. Apache Casino Resort Online: Click here Phone: 855-248-5905 & mention group code G2111PT. | HOW TO REGISTER | | | IMPORTANT DATES | | | |
| | Online: www.playcspool.com/2021-oklahoma-state-championships Email: entry@playcspool.com Fax: 702-719-7667 Postal Mail: CueSports International 2041 Pabco Road Henderson, NV 89011 | | | Oct 4: Last day for early discount Oct 11: Last day for mailed entries & personal checks Oct 11: Last day for hotel discount Oct 25: Last day for refund & change requests Oct 27: Last day to register online Nov 2: Event begins @ 6pm | | | |
| | PLAYER AGREEMENT | | | | | | |
| I hereby acknowledge that I have read and completely understand the Player Guide and/or all tournament 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 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 without limitation. | | | | | | | |
| Player/Captain Signature: _____ Date: _____ (Typed or signed name here indicates signature on behalf of all players) | | | | | | | |

SINGLES & SCOTCH DOUBLES REGISTRATION (Print or Type)

Player 1

First Name: _____ MI: _____ Last Name: _____
 Email: _____ Mailing Address: _____
 City: _____ State / Prov. _____ Postal Code: _____
 Phone: _____ Date of Birth: _____ Fargo Rating: _____
 League Name: _____ League #: _____
 Member ID: _____ Team Name Qualified on: _____ Weeks Played: _____

Player 2

First Name: _____ MI: _____ Last Name: _____
 Email: _____ Mailing Address: _____
 City: _____ State / Prov. _____ Postal Code: _____
 Phone: _____ Date of Birth: _____ Fargo Rating: _____
 League Name: _____ League #: _____
 Member ID: _____ Team Name Qualified on: _____ Weeks Played: _____

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

TEAM REGISTRATION (print or type)

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

| Team | Name (First, Last) | Member ID (last 8 digits) | Fargo Rating | Weeks Played | Email Address (required) | Phone |
|--|---|------------------------------|-----------------|-----------------|-----------------------------|-------|
| Core Roster (used to determine team rating) | | | | | | |
| Core Player 1 (Capt. Y/N) | | | | | | |
| Core Player 2 | | | | | | |
| Core Player 3 | | | | | | |
| Core Player 4 | Do not use Core Player 4 for Ladies Teams (3-player). | | | | | |
| Core Player 5 | | | | | | |
| | Do not use Core Player 5 for Ladies Teams (3-player). | | | | | |

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 | | | | | | |
| | Do not use Substitute 2 for Ladies Teams (3-player). | | | | | |