

2023 AMOW 8-BALL STATE CHAMPIONSHIPS ENTRY FORM

PERSON SUBMITTING FORM (Print or Type)

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

INSTRUCTIONS	SINGLES	START ¹	SPLIT (approx)	RACE	EARLY ENTRY (by Mar 6)	LATE ENTRY (Mar 7-13)	ON-SITE ENTRY
STEP 1 Read the Player Guide to ensure you understand the structure and eligibility requirements of each division.	<input type="checkbox"/> Elite 8-Ball 575+ Singles						
	Platinum Division ⁴	3/22 (Wed) 9am	All	R6 Med	\$140	\$160	N/A
	<input type="checkbox"/> 8-Ball Singles						
	Gold Division	3/22 (Wed) 8am	Upper 15%	R5 Med	\$80	\$100	N/A
	Silver Division	3/22 (Wed) 8am	Mid-Upper 35%	R4 Med	\$80	\$100	N/A
	Bronze Division	3/22 (Wed) 8am	Mid-Lower 35%	R4 Med	\$80	\$100	N/A
	Pewter Division	3/22 (Wed) 8am	Lower 15%	R3 Med	\$80	\$100	N/A
	<input type="checkbox"/> Ladies 8-Ball Singles						
	Diamond Division	3/22 (Wed) 9am	Upper 25%	R5 Med	\$80	\$100	N/A
	Sapphire Division	3/22 (Wed) 8am	Middle 50%	R4 Med	\$80	\$100	N/A
Ruby Division	3/22 (Wed) 8am	Lower 25%	R3 Med	\$80	\$100	N/A	
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 ⁶ (approx)	RACE ²	EARLY ENTRY (by Mar 6)	LATE ENTRY (Mar 7-13)	ON-SITE ENTRY
	<input type="checkbox"/> Elite 8-Ball Teams (5-player)						
	Platinum Division ⁵	3/24 (Fri) 8am	All	25 / R11	\$500	\$550	N/A
	<input type="checkbox"/> 8-Ball Teams (4-player / 2,000 max team rating)						
	Gold Division ³	3/24 (Fri) 8am	Upper 15%	16 / R9	\$320	\$360	N/A
	Silver Division ³	3/24 (Fri) 8am	Mid-Upper 35%	16 / R9	\$320	\$360	N/A
	Bronze Division ³	3/24 (Fri) 8am	Mid-Lower 35%	16 / R9	\$320	\$360	N/A
	Pewter Division ³	3/24 (Fri) 8am	Lower 15%	16 / R9	\$320	\$360	N/A
	<input type="checkbox"/> Ladies 8-Ball Teams (4-player)						
	Ladies Division ³	3/24 (Fri) 8am	All	16 / R9	\$320	\$360	N/A

STEP 3
 Complete the payment section and sign the player agreement.

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
 Reserve your room.

Best Western Downtown Casper Hotel
 Phone: 307-439-2074 & mention group code: Wyoming State 8-Ball

- Start times shown are the earliest possible start times. Actual start times may be later. Check the tournament brackets for actual times.
- 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.
- If the total number of 8-Ball Teams does not reach 60 teams, all teams may compete in one division.
- Any player entering Elite Platinum Division Singles that is rated lower than 575 will play as a 575 for handicapping.
- Any team entering Elite Platinum Division Team whose team rating is lower than 2,500 will play as a 2,500 for handicapping.
- After registration ends, the field will be split into multiple divisions based on teams' Fargo ratings, approximate percentages shown and in consideration of maximizing as many groups of 6 as possible.

PAYMENT METHOD (US Currency 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): _____

HOW TO REGISTER

Online: www.playcsipool.com/2022-amow-10-ball-championships
 Email: leslie@vyoamusement.com
 Postal Mail: AMOW WyoAmusement
 882 Lincoln Drive, Suite E Sheridan, WY 82801

IMPORTANT DATES

Mar 6: Last day for early discount
 Mar 6: Last day for hotel discount
 Mar 6: Last day for mailed entries & personal checks
 Mar 13: Last day for refund & change requests
 Mar 13: Last day to register online
 Mar 22: Event begins

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 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: _____

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						
Core Player 5						
Do not use Core Player 5 for Ladies Teams and 8-Ball Teams (4-player).						

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

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						
Substitute 3						
Do not use Substitute 3 for Ladies Teams or 8-Ball Teams (2 substitutes max).						