

ENTRY FORM | 2026 CSI LEAGUES CHAMPIONSHIP SERIES - OHIO

PERSON SUBMITTING FORM

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

SELECT DIVISIONS

You may register for as many divisions as you'd like. However, please review the Player Guide for division restrictions and the Match Conflicts section to ensure you understand how match conflicts will be handled.

DIVISIONS	MAX TEAM SIZE	MAX RATING	EARLY ENTRY by Jun 22	LATE ENTRY Jun 23-Aug 3
<input type="checkbox"/> 10-Ball Singles	N/A	720	\$125	\$150
<input type="checkbox"/> 8-Ball Scotch Doubles	2	1,100	\$150	\$180
<input type="checkbox"/> 8-Ball Singles	N/A	720	\$125	\$150
<input type="checkbox"/> Ladies 8-Ball Singles	N/A	660	\$125	\$150
<input type="checkbox"/> 8-Ball Teams	5/2	2,750	\$450	\$525
<input type="checkbox"/> Ladies 8-Ball Teams	3/1	1,350	\$300	\$345

SINGLES REGISTRATION INFO

First Name: _____ Last Name: _____ Member #: _____
 Email: _____ Phone: _____
 City: _____ State/Prov: _____ Zip: _____ Date of Birth: _____
 League #: _____ Weeks Played: _____ Fargo Rating: _____

SCOTCH DOUBLES REGISTRATION INFO

ROSTER	NAME (First, Last)	MEMBER ID (last 8 digits)	FARGO RATING	EMAIL (required)	PHONE
CORE 1 <input type="checkbox"/> Capt.					
CORE 2					

TEAM RATING

PAYMENT INFO

Total Charge: \$_____ Payment Method: Credit Card Check Money Order
 Exact Name on Card: _____ Card #: _____
 Card Exp Date: _____ Card Billing Zip: _____ Cardholder Phone: _____
 Cardholder Signature: _____ Email (for receipt): _____

HOW TO REGISTER

Online (Best Method): Online at www.playcsipool.com/2026-ohio

Email: Submit this completed entry form to entry@playcsipool.com

Postal Mail (Worst Method): ⚠️ Must be postmarked by Jul 13.

Make payable to: CueSports International, 1100 Grier Dr., Las Vegas, NV 89119

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, adjust races, 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 photo, image, likeness, or name for information, reporting, or promotional purposes via print, video, and other media without limitation.

Signature: _____ Date: _____

Typed or signed name here indicates signature on behalf of all teammates.

TEAM REGISTRATION INFO

League # _____ Desired Team Name: _____

ROSTER	NAME (First, Last)	MEMBER ID (last 8 digits)	FARGO RATING	EMAIL (required)	PHONE
CORE 1 <input type="checkbox"/> Capt.					
CORE 2					
CORE 3					
CORE 4	⊘ Do not use Core 4 for Ladies 8-Ball Teams. Only 3 core players are allowed for 3-player teams.				
CORE 5	⊘ Do not use Core 5 for Ladies 8-Ball Teams. Only 3 core players are allowed for 3-player teams.				

⚠️ Subs may not be rated higher than the core player being replaced.

_____ TEAM RATING

SUB 1 <input type="checkbox"/> Capt.					
SUB 2	⊘ Do not use Sub 2 for Ladies 8-Ball Teams. Only 1 sub is allowed for 3-player teams.				