



CORNER POCKET

Official Tournament Entry Form



Please circle one for each category

Date : _____

Event: 8-Ball 9-Ball Table Tennis Other _____

Division: Women Men Mixed

First Name		Last Name		M.I.
Partner's First Name (if applicable)		Partner's Last Name (if applicable)		M.I.
Current Address:				
City		State		Zip Code
Phone		Alternate Phone		Email
Student ID Number (G Number)			Classification (Freshman, Sophomore, etc.)	
Country of Citizenship		Exp. Grad. Date		Major
Degree: BS BA MS MA PhD Other _____ (Please Circle One)				
Table Tennis Only: USATT Rating: _____ Right Handed or Left Handed				
Are you a Mason Employee? Yes No If Yes, what department? _____				

**Information in this block is REQUIRED, if registering for the
ACUI Regional Recreation Tournament Qualifier**

Does your Cumulative GPA meet the 2.0 requirement? Yes No
 Number of Course Hours Enrolled in this semester: _____
 Number of Course Hours completed in the past year: _____
 Number of years of regional tournament experience, including this year: _____
 If you qualify, will you need university transportation? Yes No

The Registrar's Office will verify the accuracy of the information recorded as a requirement by the ACUI Recreation Committee. All information is subject to verification by appropriate university personnel. Awards for the ACUI Qualifying Tournament will be presented only after the recipients have represented Mason at the ACUI Regional Recreation Tournament.

Please Sign and Date indicating that you have provided, to the best of your knowledge, accurate information and understand that you are not eligible for a refund if deemed ineligible to compete based on misrepresentation of information on this form.

Tournaments may be cancelled due to low participation and refunds will be made.
 I understand Mason Employees are not eligible to receive monetary or non-monetary prizes.

Signature _____

Date _____

FOR OFFICE USE ONLY

Amount Paid \$ _____

Staff Signature _____