



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# COME ONE, COME ALL PLAY PICKLEBALL!

## 1st Annual Pickleball Tournament JOPLIN FAMILY YMCA

**Tournament Dates: November 10-11 (Sat. & Sun.)**  
**Registration Deadline: November 2**

This "fun" tournament will base brackets on registration numbers. Check-in will be 30 minutes prior to the event. We will start at 9:00am on Sat., Nov. 10! You must be ready for the match when it is announced. If you are not at the court ready to play within 10 minutes of the match announcement, you may be asked to forfeit. We will be using the indoor, green pickleballs. We will have medals for the 1st, 2nd, & 3rd place in each division. Everyone is encouraged to bring a snack to share and enjoy in the Joplin Family Y community room.

### ENTRY INFO:

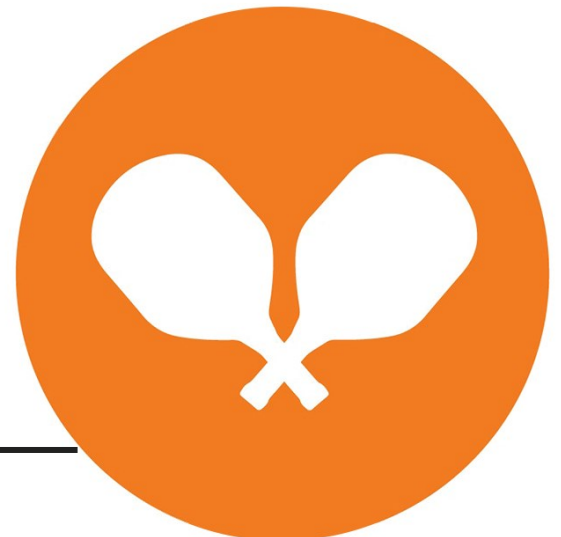
Entry Fee: \$30 & \$5 for each additional event  
(Fee includes T-shirt if registered by Oct. 26.)  
Must be 18 years old and over to participate.

### SIGN UP TODAY!

You can sign up at the front desk of the Joplin Family Y or online at [joplinfamilyy.org](http://joplinfamilyy.org). If you have any questions, you may contact community volunteer, John Hirshey at 417 850 2544 or [John.Hirshey@yahoo.com](mailto:John.Hirshey@yahoo.com).

### LEAGUES

Women's Doubles  
Men's Doubles  
Mixed Doubles



# 1ST ANNUAL PICKLEBALL TOURNAMENT

## TOURNAMENT DETAILS

### LEAGUES

Men's Doubles, Women's Doubles, Mixed Doubles

### LOCATION

Joplin Family Y-3404 W. McIntosh Circle Joplin, MO

### FEES

\$30

\$5 for each additional event

### (ADDITIONAL INFORMATION)

T-shirt provided. If registered by Oct. 26.

Must be 18 years old and over to participate.

1st, 2nd, and 3rd place medals in each division.

### T-SHIRT SIZE

SMALL

XXL

MEDIUM

LARGE

XL

I am interested in a \$100 sponsorship with Individual's Name or Business' Name on back of T-shirt. (Logo & payment needed by Oct. 26)

Name (one participant/form)

Birth Date

Gender:  Male  Female

Address

City

State

Zip

Phone

E-mail

Men's Doubles Partner's Name

Women's Doubles Partner's Name

Mixed Doubles Partner's Name

**PAYMENT INFORMATION:**  Check  American Express  MasterCard  Visa  Discover

Card No.

Expiration Date

CVV#

I release the Joplin Family YMCA, its coaches and officials from all claims of injury which may be sustained by the aforementioned participant while participating in any Y-sponsored activity, whether caused by negligence of the Y or otherwise. If medical attention is required, I give my permission for such medical care. I also agree to follow the Joplin Family YMCA sportsmanship standards and guidelines. By signing below, I give the Y permission to use photographs or videos of the named participant in its promotional/educational materials.

Participant Signature

Date

STAFF USE ONLY: Amount Paid

Staff

