



# SUMMER MATCH PLAY 2024 - SATURDAY & SUNDAY REGISTRATION FORM

## COMPLETE REGISTRATION FORM

This will assist directors to gauge the participation level for the season.

1) NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

2) EMAIL \_\_\_\_\_

3) ABILITY LEVEL:     2.5 BEGINNER     3.0 INTERMEDIATE     3.5 HIGH INTERMEDIATE  
                           4.0 ADVANCED     4.5 ADVANCED +

4) CHECK OFF DAYS/TIMES OF INTEREST:     SATURDAY 9:00 am     SUNDAY 9:00 am

5) PLAY PREFERENCE:     SINGLES                     DOUBLES                     EITHER

6) You are automatically scheduled to play EVERY weekend unless you email Steve: [ginzo27@aol.com](mailto:ginzo27@aol.com) or text 716-913-0147 by the THURSDAY before the weekend of play or if you have provided information on the form (vacation dates). You will be notified in advance if spots become totally filled and will have a bye.

7)  Place charges of play on my MTC Account (credit card on file required).     I prefer to make a payment at the front desk prior to play.

8) PROVIDE ANY ADDITIONAL INFORMATION & VACATION DATES TO STEVE: