



# SUMMER MATCH PLAY 2024 - MONDAY THROUGH FRIDAY REGISTRATION FORM

COMPLETE REGISTRATION FORM - This will assist directors to gauge the participation level for the season.

NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

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

3) CHECK OFF DAYS/TIMES OF INTEREST:

<input type="checkbox"/> MONDAY	<input type="checkbox"/> TUESDAY	<input type="checkbox"/> WEDNESDAY	<input type="checkbox"/> THURSDAY	<input type="checkbox"/> FRIDAY
<input type="checkbox"/> 8:30 am	<input type="checkbox"/> 8:30 am	<input type="checkbox"/> 8:30 am	<input type="checkbox"/> 8:30 am	<input type="checkbox"/> 8:30 am
<input type="checkbox"/> 10:00 am		<input type="checkbox"/> 10:00 am		<input type="checkbox"/> 10:00 am
<input type="checkbox"/> 6:00 pm	<input type="checkbox"/> 6:00 pm	<input type="checkbox"/> 6:00 pm	<input type="checkbox"/> 6:00 pm	
<input type="checkbox"/> 7:30 pm	<input type="checkbox"/> 7:30 pm	<input type="checkbox"/> 7:30 pm	<input type="checkbox"/> 7:30 pm	

4) PLAY PREFERENCE:     SINGLES                       DOUBLES                       EITHER

5) **\*\* REQUIRED \*\*** To get on the schedule EMAIL/TEXT MATCH PLAY DIRECTOR EACH WEEK (at least 48 hrs in advance).  
Requests will be taken in order of receipt.

6)  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.

7) PROVIDE ANY ADDITIONAL INFORMATION TO THE DIRECTOR: