BUTTERFU 2024 Michlin Metals Open BUTTERFU CONTRACTOR OF CONTRACTOR CONTRACTOR OF CONT

April 20/21, 2024 SANCTIONED BY USATT

SATURDAY APRIL 20, 2024

12:00 PM UNDER 1000 \$30 FEE 1-PLACE,2 PLACE,3-PLACE TROPHY

4:00 PM UNDER 1400 \$30 FEE 1 PLACE,2 PLACE,3-PLACE TROPHY

SUNDAY,APRIL 21, 2024 9:00 AM UNDER 1800 \$30 FEE \$100 1-PLACE, \$70 2-PLACE, \$30 3-PLACE

12:00 PM UNDER 2100 \$30 FEE \$120 1-PLACE, \$80 2-PLACE, \$40 3-PLACE

4:00 PM OPEN SINGLE \$40 FEE \$200 1-PLACE, \$100 2-PLACE, \$50 3-PLACE

BUTTERFLY 3*R40 BALLS WE WILL USE FOR THIS TOURNAMENT

For registration please call: 847-932-9830 wojtekwo@juno.com or www.omnipong.com Address :111 S Lombard Rd #8 Addison IL Tournament management may modify, combine or cancel events. No refund after April 17, 2024. Unrated players may enter any event but only from Open event may advance to next round. Any questions regarding the tournament should be directed to Wojtek Wolski at 847-932-9830

Name					
Address					
City			State	Zip	
Date of Birth		Age	_USATT Rating		
Club Affiliation			USATT Member #		
Phone Number		Email Address			
1.	Under 1000		Saturday	April 20 12:00 pm	
2.	Under 1400		Saturday	April 20 4:00 pm	
3.	Under 1800		Sunday	April 21 9:00 am	
4.	Under 2100		Sunday	April 21 12:00 pm	

Events may be modified at the discretion of the Tournament Director. A player must be a member of the USATT to participate or purchase a Tournament Pass. USATT memberships may be purchased at the tournament. USATT memberships: Basic \$25 per year/Pro \$75 per year. Tournament Pass \$50 Adult, \$20 Junior.

Sunday April 21 4:00 pm

Entry Fees (mandatory) \$_____

5. Open

USATT Membership Fee (mandatory) \$_____

Donation to USATT National Team \$_____

Donation to Experior Tabel Tennis Club \$_____

TOTAL \$ ______ (Make checks payable to: Wolspin Table Tennis Inc. or Zelle using wojtekwo@juno.com)

All matches will be 3 of 5 games.

Format will be RR groups of up to four or more players with the top 2 players advancing in all events – note UR players can only advance in the Open. Unrated players may enter any events but will not advance from their round robin.

No money prize, trophies or medals wins for unrated players (except Open event).

No prizes awarded for splits, defaults or no-shows.

The building opens: Saturday April 20 at 11:00 AM and Sunday April 21, 2024, at 8 AM.

Check-in time: participants are required to check-in 20 minutes prior to start time Default: Failure to show up at the assigned table will result in default 10 minutes after the start time. Entry Limits: Tournament has a maximum limit. Once the maximum limit is reached, additional registrants will be put on a waiting list until the entry deadline when a final entry list will be posted on www.OmniPong.com. will be 4/18/24.

Tournament committee may modify, combine, or cancel events, limit total entries or total entries by event. All USATT rules will be enforced. The latest ratings will be used for seeding.

Questions? Email us at wojtekwo@juno.com or call @ 847-932-90830

Equipment: 5 Butterfly Tables and 2 Joola SC 3000 tables and nets; white Butterfly R 40+ 3 Star Balls. Venue: Experior Table Tennis Club 111. S Lombard Rd #8 Addison IL 60101 (do not mail entry form here) Send completed entry form to: Wojciech Wolski, 833 Ruskin Ct. Schaumburg IL 60193 or register at Omnipong.com

Deadline: Entries must be received by April 17, 2024. No refunds after entry deadline. Venue has rubberized flooring. Parking is free.

Tournament Staff & Officials: Tournament Director Michael Wolski

Tournament Referee: Wojciech Wolski - CR

Any image, photo or otherwise, of tournament play or within the venue is the joint property of USA Table Tennis and Experior Table Tennis Club. Entrants agree to allow their voice, image likeness, and/or any other representation to be broadcast, reproduced, or publicized by any medium.

USATT TOURNAMENT PARTICIPANT WAIVER

IN CONSIDERATION of being permitted to participate in any way in USA Table Tennis sanctioned events, I and/or minor child, our personal representatives, assigns, heirs, and next of kin, I:

ACKNOWLEDGE, agree, and represent that I and/or minor-aged child understand the nature of Table Tennis Activities, including but not limited to risks involved in the sport itself together with all risks, known and unknown, associated with gatherings of people ("Activities"), including the exposure to COVID-19, coronavirus, or other infectious organisms or diseases; and that I and/or minor child are qualified, in good health, and in proper physical condition to participate in such Activities. I further agree that if at any time I believe conditions or equipment to be unsafe, I and/ or minor child will immediately discontinue further participation in the Activities.

FULLY UNDERSTAND that (a) TABLE TENNIS ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT

DISABILITY, PARALYSIS, DISMEMBERMENT, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by me and/or minor child's own actions, or inaction, or the actions or inaction of others participating in the Activities, the condition in which the Activities takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SEVERE SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I and/or minor child incur as a result of my participation in such Activities.

HEREBY ACCEPT AND ASSUME ALL SUCH RISKS, KNOWN AND UNKNOWN, AND ASSUME ALL RESPONSIBILITY FOR THE LOSSES, COSTS, AND/ OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS, OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW.

HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE USA TABLE TENNIS, their respective administrators, directors, agents, officials, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activities takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY

AGREEMENT I and/or my minor child, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

By registering for this table tennis tournament, all participants are subject to possible selection for drug testing as conducted by the US Anti-Doping Agency.

MEDICAL AND TRANSPORTATION RELEASE – I hereby give consent for the organizers of this table tennis tournament to provide me and/or my minor aged child with athletic trainer and emergency medical treatment. I swear and affirm that I am in good physical condition and I am not aware of any previous or existing diseases or injury that would result in my being injured. I further acknowledge that I have procured on my own and currently hold valid and adequate insurance for such loss, damage, or injury and if I do not have valid and adequate insurance, I accept full responsibility for the cost of the loss, damage, or injury that might occur as a result of my participation in this table tennis tournament. I give my consent to participate in any and all emergency transportation associated with activities during this table tennis tournament, in the event I become incapacitated or otherwise not conscious to give direct consent and I accept full responsibility for all costs associated with all emergency transportation as deemed necessary. Further, as the parent/guardian of a participating minor athlete, I hereby give my consent for complete medical treatment and emergency transportation services as deemed necessary beyond the on-site athletic trainer or emergency medical treatment provided.

MEDIA AND PHOTO RELEASE – Any image, photographic, or otherwise, taken of tournament play or within the official venue is essentially the property of USA Table Tennis regardless of the Approved status of the recording instrument or photographer. Entrants agree to allow their voice and likeness in such images to be reproduced in connection with USA Table Tennis by way of any medium. USA Table Tennis is not responsible for, nor can they control, the use of camera phones inside the venue. Participants are hereby notified of this policy.

SafeSport Compliance: I understand USATT's Safe Sport Policy including the organization's Coaching Policy, which requires that all persons who are engaged in coaching activities at USATT Affiliated Member Clubs and/or USATT Sanctioned Tournaments, except parents or legal guardians coaching their own children, must be fully Safe Sport Compliant, which includes completing SafeSport Training offered by the US Center for SafeSport every year and undergoing a criminal background screen every two years.

I understand that, pursuant to USATT's Minor Athlete Abuse Prevention Policy, all participants at USATT Sanctioned Tournaments who are over the age of 18 and have regular contact with or authority over minor athletes must complete annual SafeSport Training offered by the US Center for SafeSport.

More information on USATT's Safe Sport Policy is available at: https://www.teamusa.org/usa-tabletennis/athlete-safety/safe-sport.

Signature of Participant	Print Name: Date:	
Signature of Parent/ Legal Guardian	Print Name:	Date:
(For Athlete of minor age 17 and under).		



USATT SAFE SPORT PROTOCOL ENTRY BLANK TEMPLATE FOR USATT SANCTIONED TOURNAMENTS

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