



2026 African Table Tennis Diaspora Open

Table Tennis Tournament – Saturday & Sunday, August 15-16, 2026

Texas Table Tennis Training Center, 5902 Sovereign Dr., Houston, TX 77036

Tournament Directors: Robert Mayer, Abolaji Ogunshola

Referee: Yaoyao Zhang (NU, RR)

Host: Dylan Nguyen, 832-649-7355

Rules and Equipment: All USATT rules will govern play, including USATT dress code and use of only USATT-approved equipment (www.usatt.org/rules). Open to all current USATT members (Silver plan \$50, Gold plan \$100, Lifetime plan \$1300). Non-members may purchase a Tournament Pass for \$20. Go to <https://usatt.justgo.com> to purchase a USATT membership or Tournament Pass. Butterfly R40+ 3-star, 40+ mm white balls will be used on 10 Butterfly Centerfold 25 tables on a professional rubberized floor with spacious court sizes.

Event Details: USATT Sanctioned 2-Star tournament. All matches will be best-of-five games. Top two finishers from each round-robin group will advance into a single-elimination bracket.

Event Name	Format	Start Time	Entry Limit	Entry Fee	1st Place Award	2nd Place Award	3rd Place Award	4th Place Award
U2200	RR	SAT 09:00 AM	20	\$45	\$300	\$150	\$75	\$75
U1500	RR	SAT 09:00 AM	20	\$35	\$75	\$35		
Open Singles	RR	SAT 12:30 PM	22	\$55	\$1500	\$700	\$350	\$350
U1700	RR	SAT 12:30 PM	20	\$40	\$100	\$50		
O40 (& U2200)	RR	SAT 04:00 PM	20	\$40	\$300	\$150	\$75	\$75
U1900	RR	SUN 09:00 AM	20	\$40	\$200	\$100		
U1300	RR	SUN 09:00 AM	20	\$30	\$50	\$25		
Women's Singles	RR	SUN 11:00 AM	16	\$40	\$300	\$150	\$75	\$75
U2500	RR	SUN 1:00 PM	20	\$50	\$400	\$250	\$100	\$100

Entry Information: Player cannot enter multiple events that have the same start time. Rating cutoff date is August 11, 2026. Top two rated players in the Open Singles will be seeded out of preliminary round-robin stage. Unrated players can play in any event and may be allowed to advance out to playoffs only if performance estimate is aligned with event level performance. All players can advance out of the group in the Open Singles and Women's Singles events.

Tournament Committee can give an estimated rating to unrated players. Entry deadline is **9:00 PM on Monday, August 10**. Entries received without payment as of the deadline will be disregarded. Cancellations made before the entry deadline will be granted full refunds but afterwards will be at the discretion of the Tournament Director. Events may be modified at the discretion of the Tournament Committee.

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Name _____ Address _____

Phone _____ Email _____ Date of Birth _____

USATT ID _____

Circle Events Entered: U1300, U1500, U1700, U1900, U2200, O-40(& U2200), U2500, Open Singles, Women's Singles

Total Entry Fees _____

Donation to USA National Team (optional) _____ USATT Rating Fee \$3.00 _____ Total Payment _____

Please make payments online through omnipong.com via PayPal: africandiasporatt@gmail.com

All payment related questions, contact Uko Marcus (706) 326-0450 or Abolaji Ogunshola (202) 302-1994

I agree to abide by all USATT and local rules and regulations. In consideration of acceptance of my entry, I hereby release the USATT, the Texas Table Tennis Training Center, the tournament sponsors, the tournament staff and volunteers from any and all actions, claims or demands for any loss, damage or injury sustained to my person or property. I am assuming full risk and responsibility for my participation in the tournament.

Signature _____ (Parent or guardian, if minor)



USATT SAFE SPORT POLICY TEMPLATE
ENTRY BLANK TEMPLATE FOR USATT SANCTIONED TOURNAMENTS

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.usatt.org/athlete-resources/safesport>.

USA TABLE TENNIS

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Tournament: _____ **Date:** _____

Tournament Director: _____ **Club Name:** _____

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

2. ACKNOWLEDGE, agree, and represent that I and/or my minor understand the nature of Table Tennis Activities and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such Activity. I further agree that if at any time I believe conditions or equipment to be unsafe, I and/or my minor child will immediately discontinue further participation in the Activity.

3. FULLY UNDERSTAND that (a) TABLE TENNIS ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH, HARASSMENT, EXPOSURE TO INAPPROPRIATE CONDUCT AND LANGUAGE ("RISKS"); (b) these Risks and dangers may be caused by me and/or my child's own actions, or inaction, or the actions or inaction of others participating in the Activity, the condition in which the Activity 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 my minor child incur as a result of my participation in the Activity.

4. 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;

5. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE USA TABLE TENNIS, their respective administrators, directors, agents, officers, officials, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity 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.

6. 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.

Signature of Participant: _____ Print Name: _____ Date: _____

Parent/Legal Guardian Signature _____ Print Name: _____ Date: _____
(if under 18):