



2019 Greater Elmira Tennis Association

17th Annual Gary Marshall "Strictly Doubles" Tournament

September 21-22, 2019

West Elmira Tennis Courts in Pirozzolo Park, Grandview Ave. (off Water St.)

Event Fees:

\$36 per team; each event

- **Men's Doubles**
- **Women's Doubles**
- **Mixed Doubles**
- **Adult/Youth Doubles** – Adult's age must be over 18, at least twice the youth's age (18 & under)
- **Century Doubles** – Ages added together are equal to 100 or more
- **50+ Mixed Doubles** – All players must be 50 years of age or older
- **B Doubles** – NTRP of 3.5 or below; any gender combination

NO TELEPHONE ENTRIES ACCEPTED

NOTE: ALL entries must be received by Tuesday, September 17, 2019

- Make **check** payable to GETA. Complete the information and mail to the address below:

GETA Gary Marshall Strictly Doubles Tournament
P.O. Box 147
Big Flats, NY 14905

- Tournament draw and **results** will be placed on the GETA website: <http://greaterelmiratennisassociation.com/>

- **Questions?** Call tournament director, Steve McGary, at 607-684-3684 or email: smcgary104@aol.com

() YES, notify me of my schedule by email on Friday that refers me to the website, rather than phone.

() No, I prefer that you notify me of my schedule on Friday by phone.

Name _____ USTA# _____ Date of Birth ___/___/___

Address _____ City _____ State _____ Zip _____

Home Ph# _____ Work Ph# _____ Cell Ph# _____

Email _____ I give GETA permission to use my photograph for advertising.

I would like to compete in the following categories (only TWO events per person):

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Men's Doubles | <input type="checkbox"/> Women's Doubles | <input type="checkbox"/> Mixed Doubles | <input type="checkbox"/> Adult/Youth Doubles |
| <input type="checkbox"/> Century Doubles | <input type="checkbox"/> 50+ Mixed Doubles | <input type="checkbox"/> B Doubles | |

Partner's Name – 1st Event _____ USTA# _____ Date of Birth ___/___/___

Address _____ City _____ State _____ Zip _____

Home Ph# _____ Work Ph# _____ Cell Ph# _____

Email _____ I give GETA permission to use my photograph for advertising.

Partner's Name – 2nd Event _____ USTA# _____ Date of Birth ___/___/___

Address _____ City _____ State _____ Zip _____

Home Ph# _____ Work Ph# _____ Cell Ph# _____

Email _____ I give GETA permission to use my photograph for advertising.

Total Amount Enclosed: _____

Please be prepared to play multiple matches each day of the tournament.