



Merseyside Para Open Entry Form

A Disability Grand Prix Event

A separate entry form must be completed by each player and sent to:
Mark Palmer, Greenbank Sports Academy, Greenbank Lane, Liverpool, L17 1AG.

Are you a current member of BTTAD? Yes No

Competitor's full name

Address

Postcode

Mobile Telephone No Email

ENTRY DETAILS

Please state which class you will play in: (refer to the classification guide)

Which events do you wish to enter? (please tick) (see information pack for rules)

Doubles Please state your partner's name / 'wanted'

Open Singles Please state your band (A, B or C)

Class Singles

Junior Singles Date of Birth

EVENT FEE

£15 per competitor - Cheques to be made payable to Greenbank Sports Academy.
If you require a receipt please enclose a stamped addressed envelope.

All entrants should ensure that they have read the tournament regulations. **NO ENTRY WILL BE ACCEPTED UNLESS THE FOLLOWING UNDERTAKINGS ARE SIGNED:**

I undertake:

1. To observe the regulations of the tournament.
2. To abide by the decisions of the Referee.
3. To fulfil the schedule of play arranged for me unless prevented by circumstances beyond my control and accepted by the Referee.
4. To agree to the above information being stored on a computer system.

Signed (competitor)

Counter signed (parent/carer)

PHOTOGRAPHIC CONSENT

This will be used for promotional purposes by Greenbank Sports Academy.

I give permission I do not give permission to be photographed

Signed (competitor)

Counter signed (parent/carer)

MEDICAL CONDITIONS

I understand that the event organising committee require me to state any known medical conditions and their management.
Known medical condition(s)/medication taken: (add n/a if there are no medical conditions)