

# Herb Wunsch Memorial Tennis Tournament

## Join players from around the Coulee Region at the 3rd Annual Herb Wunsch Memorial Tennis Tournament

The tournament will features 14 & 18 under divisions in Boys Singles, Girls Singles, Boys Doubles, and Girls Doubles. Tournament information, entry forms and draws will be available on the web by visiting our web page:

**www.holmenwi.com/holmenpr.**

**Dates:** Boys/Girls Doubles - Thursday, July 9th  
Boys/Girls Singles - Friday & Saturday  
July 10th & 11th

**Entry Fee:** \$15.00 - Singles (includes tournament shirt)  
\$30.00 - Doubles/team (includes shirt)



There will be a two match guarantee. Format may vary based upon number of entries. Players registered must be free to play any time on the given dates. Deadline to register is July 3rd.

### HERB WUNSCH MEMORIAL TENNIS TOURNAMENT JULY 9TH-11TH

Name: \_\_\_\_\_ Grade (Fall 2009): \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Seeding Information: School: \_\_\_\_\_ Ranking/Ability/Right: \_\_\_\_\_

More Seeding info (Accomplishments, School Record): \_\_\_\_\_

_____ 14 & Under Girls Singles _____	_____ 14 & Under Boys Singles _____
_____ 14 & Under Girls Doubles _____	_____ 14 & Under Boys Doubles _____
_____ 18 & Under Girls Singles _____	_____ 18 & Under Boys Singles _____
_____ 18 & Under Girls Doubles _____	_____ 18 & Under Boys Doubles _____

List Partner: \_\_\_\_\_

**Fees: Singles:** \$15.00 per person **Doubles:** \$30 per team

**Amount Paid:** \$ \_\_\_\_\_ Payable To: Holmen Park & Recreation

**SIGNATURE OF PARENT/GUARDIANSHIP PARTICIPANT:** I hereby understand that my son/daughter has registered to participate in the above state program, like most programs similar in nature, has some degree of interest risk involved. Furthermore, my son/daughter/self is in good physical condition appropriate for the stated activity and that PARTICIPANTS MUST Furthermore ASSUME FULL RESPONSIBILITY FOR PERSONAL INJURY INCURRED WHILE TAKING PART IN THE ACTIVITY. NO ACCIDENT INSURANCE IS PROVIDED THROUGH THE VILLAGE OF HOLMEN.

Please list any special considerations we should know of (medicine, disabilities, etc.): \_\_\_\_\_

Parents/Guardians Names (PRINT): \_\_\_\_\_ & \_\_\_\_\_ Phone if different: \_\_\_\_\_

Signature (Parent/Guardian/Participant Over 17): \_\_\_\_\_ Date: \_\_\_\_\_