



# 8th Annual Northville Badminton August 29 & 30, 2009 Tournament

At Recreation Center at Hillside Middle School  
700 W Baseline Rd, Northville, MI 48167  
Phone (248) 449-9947, Fax (248) 380-8611

Registration starts **NOW!**

Players must register incl. payment by **Aug 21** to ensure seeding.

Sat, August 29 **Men/Women Singles** Play starts at 9:00am

Sat, August 29 **Men's Doubles** Play starts at 11:30pm, **Women** 2:00pm

Sun, August 30 **"Mixed"** Doubles Play starts at 9:00am

**Rally Score System**

**Prizes will be awarded!**

Miscellaneous:

- Shuttles may be purchased at the tournament from Caymen Badminton Supply

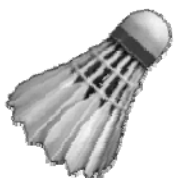
Cost: \$ 20.00 for the 1<sup>st</sup> event, \$ 10.00 for each additional event (US Dollars only!!!)

Return entries with check payable to "Northville Parks & Recreation"

700 W Baseline, Northville, MI 48167

Attn: Northville Badminton Tournament

For further information contact: [mariastewart27@yahoo.com](mailto:mariastewart27@yahoo.com)



## Northville Badminton Tournament Registration

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Gender: M / F      Ability level: A / B / C / D

Home Club: \_\_\_\_\_

Payment Method:

Check (Payable to "Northville Parks & Recreation", 700 W Baseline, Northville, MI 48167)

Visa/Mastercard # \_\_\_\_\_ Expiration Date \_\_\_\_\_

| Event         | Player's Name | Partner/Request |
|---------------|---------------|-----------------|
| Women Singles |               |                 |
| Men Singles   |               |                 |
| Women Doubles |               |                 |
| Men Doubles   |               |                 |
| Mixed Doubles |               |                 |

Total # of events entered: \_\_\_\_\_

Total fee enclosed: \_\_\_\_\_

WAIVER: I hereby release and hold harmless on behalf of myself, the City and the Township of Northville and their Parks and Recreation Department, and the Northville Public Schools from liability for injuries or damages which I may sustain while participating in this activity even if the injuries or damages are caused by the sole negligence of the City or Township or their Parks and Recreation Department or the Northville Public Schools. I understand that I am responsible for medical coverage.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### THREE EASY WAYS TO REGISTER!

1. Walk it in: Our office hours are: 7:00am – 4:30pm Mon. - Fri.
2. Mail it in: Our address is: 700 W. Baseline Rd, Northville, MI 48167
3. Fax it in: Our fax number is (248) 380-8611

Note: Driver's License Number required on checks