



8th ORA TOUR STOP

Presented by...

DAN OBRIST
RECYCLING & DEMOLITION




Cascade Athletic Clubs

★ **2011 Regionals** ★

Racquetball Championships

Gresham, Oregon



USA
RACQUETBALL

★ *Fast* ★ *Furious* ★ *Fitness* TM

April 13th-17th, 2011

THANK YOU

PAPA'S PIZZA PARLOR
A Slice of Family Fun!



Gresham



TOYOTA

503.667.1135

www.greshamtoyota.com

Gresham

SCION



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CASCADE ATHLETIC CLUBS

www.CascadeAthleticClubs.com

GROCERY OUTLET
Bargains Only!

Maletis BEVERAGE

Wilson
ORA OREGON racquetball ASSOCIATION

Cascade Athletic Clubs-Gresham

19201 SE Division St Gresham, OR 97030 503.665.4142

April 13th-17th

Local Players within a 60 mile radius (including Salem & Longview) - will have to play on Wednesday and/or Thursday beginning at 6pm. Fridays Play for EVERYONE will begin at 9am.

Special Time Requests for Wed/Thu MUST be made in writing PRIOR to the tournament deadline date. If we cannot accommodate your request, we will send your entry and fee back in the mail.

**NO SPECIAL TIME REQUESTS
for FRI, SAT & SUN**

TOURNAMENT HOURS:

Wed & Thu	6pm-11pm
Friday	9am-12mn
Saturday	7am-12mn
Sunday	8am-5pm

ENTRY FEE*:

1 Event \$55 2 Events \$65
(3 Events \$75 if 3rd is mixed)

If your entry is not received by April 7th and we accept your application, you will owe a \$5 late fee, **no exceptions!**

* Must be a current Member of USA Racquetball or join with this entry, **no exceptions!** Annual dues are \$50 (or \$20 for 1 event).

At registration, Members may have to present a current USA Racquetball Membership card, an application receipt or a cancelled check as proof of membership or pay dues then.

ENTRY DEADLINE

Thursday, April 7th

Payment must accompany entry or register on-line at: www.OregonRacquetball.org
Phone Entries, Faxed Entries or E-mailed Entries will not be accepted

TOURNAMENT DIRECTORS:

Brian Ancheta (503.665.4142)
Connie Martin & Ed Boyle
baancheta@aol.com

BALL: **Propenn** (Green Ball)

STARTING TIMES

available on or after 2pm
TUESDAY, APRIL 12th at
www.OregonRacquetball.org
or by calling 503.665.4142
& asking for YOUR times only

INCLUDES:

- * Tournament Shirt
- * Friday Snack & Dinner
- * Sat Breakfast/Lunch/Dinner
- * Sunday Brunch
- * Drink Card
- * Guarantee of 2 Matches
- * Medals 1st/2nd/3rd and Cons 1st (w/ 8 or more entries)

CONDITIONS OF PLAY:

1. All participants must be a member of the USAR before they play their first match. If you are not, please enclose a separate check in the amount of \$50 (\$25 if 21 & under) for one year or \$20 for one event.
2. USA Racquetball rules apply.
3. A match will consist of 2 games to 15 pts, tie-breaker to 11 pts. ALL Consolation matches will be 1 game to 21 pts.
4. You may play maximum of 1 or 2 events. (3 events if playing a singles and mixed doubles). If you play 3 events, there are no time considerations at all).
5. Players must be ready to play 30 minutes prior to their scheduled match time.
6. All losers must referee after each win or find a suitable replacement.
7. One Serve Rule for all Open Divisions.
8. Requests for special time considerations must be in writing before the entry deadline. Scheduling changes will not be made after the draw is complete.
9. No refunds after Thursday, April 7th.
10. All Players must wear approved lensed eye wear as specified in Rule 2.5(a).
11. For the Safety of all players, members and children... children 14 & under accompanying you to the tournament, must be attended by an adult at all times. The Kids Klub (nursery) is open for limited hours. Call Club for fees and hours. (503.665.4142).
12. We reserve the right to combine divisions if less than 6 players/teams. However, we will award your ranking points in the division you signed up for IF you let us know during the tournament.
13. No outside alcoholic beverages may be consumed on the premises.
14. The Player Code of Conduct must be followed at all times or you may be forfeited from the Tournament. Available at Tournament Desk or at: www.OregonRacquetball.org.

**Oregon Players must abide by
the Oregon Ranking System
See www.OregonRacquetball.org**

APPROVED LENSED EYE WEAR IS MANDATORY

It is mandatory that you wear approved protective lensed eyewear. (for a complete list go to: www.usra.org>rule book>eyeguards)



TOURNAMENT HOTEL
1-503.669.7000

3039 NE 181st (Exit 13 off I-84)

Tournament Rates \$79/2 beds

\$89/2 beds and sofa

FREE Shuttle to the Club

Click Cascade Tourney at:

www.HamptonInn.com

*or call the 1-800-HAMPTON and
ask for the Cascade Tourney rate.*

**Enter on-line (extra fee)
or download more entries at
www.OregonRacquetball.org**

If you are playing in the
**EKTELON NATIONAL
SINGLES CHAMPIONSHIPS**
Fullerton, CA
May 25th-30th, 2011
You Must Play In a Qualifier Event
In Order To Compete.
Nationals Tournament Director:
Jim Hiser JHiser@usra.org
National Entries available online
at: www.usra.org

USAR Regionals 2011 Application Form

Name _____
 Home #() _____ Birth date ___/___/___ Age on 4/13/11 _____
 Cell # () _____ Club Affiliation _____
 Address _____
 City _____ State _____ Zip _____
 E-Mail: _____
 T-Shirt Size: ___XS (Kids Large) ___S ___M ___L ___XL ___XXL ___XXXL

If mailing this application, please make sure to sign the next page and return both pages.

**Maximum of 2 divisions, 3 if playing Mixed Doubles and 1 Singles.
 NO TIME RESTRICTIONS ACCEPTED if playing 3 divisions.**

SINGLES		
	Men	Women
Open*		
Elite*		
A*		
B*		
C*		
D*		
24-		
25+		
30+		
35+*		
35+A/B*		
35+C/D*		
40+		
45+*		
45+A/B*		
50+		
55+*		
60+		
65+		
70+		
75+		
80+		
85+		

DOUBLES DIVISIONS			
	Men	Women	Mixed
Open Doubles*			
Elite Doubles*			
A Doubles*			
B Doubles*			
Mens 35+ Doubles*			
Mens 35+A/B Doubles*			
Division	Partner		
_____	_____		
_____	_____		

Special Seeding Considerations:

Special Time Requests:

(NO Special Time Requests for Fri/Sat/Sun)

Make Checks Payable To:

Cascade Athletic Club

Mail To: c/o USAR Regionals

Cascade Athletic Club

19201 SE Division Gresham, OR 97030

Staff Only:

Entry Fees \$ _____

Late Fee \$ _____

USAR Fee \$ _____

Date: _____ Receipt #: _____

_____/_____/_____ _____

Notes

TOTAL:
 \$ _____

Payment:

Entry Fees 1 event ___ \$55

2 events ___ 65

3 events* ___ 75

*3 events if third is mixed, no time restrictions

USAR Dues (Adult) ___ \$50

or 3 years ___ 125

or 1 event fee ___ 20

USAR Dues (Jr 21 & ↓) ___ 25

Other _____

Total Enclosed \$ _____

*Add a \$5 Late Fee if payment is not received in hand by April 7th (and we have room for you)

WAIVER: I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT, I AM ASSUMING RISKS, AND AGREEING TO INDEMNIFY, NOT TO SUE AND RELEASE FROM LIABILITY THE ORGANIZER OF THIS EVENT (CASCADE ATHLETIC CLUBS), USA RACQUETBALL (USAR), ORA, USA RACQUETBALL FOUNDATION (USARF), AND THEIR RESPECTIVE AGENTS, EMPLOYEES, VOLUNTEERS, MEMBERS, CLUBS, SPONSORS, PROMOTERS AND AFFILIATES (COLLECTIVELY "RELEASEES"), AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS ENTRY BLANK AND RELEASE IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL COMPETITIONS AND ACTIVITIES ENTERED AT THE EVENT, REGARDLESS WHETHER OR NOT LISTED ABOVE. I HAVE READ IT CAREFULLY BEFORE SIGNING, AND I UNDERSTAND WHAT IT MEANS AND WHAT I AM AGREEING TO BY SIGNING.

In consideration of the issuance of a license to me by one or more Releasees or the acceptance of my application for entry in the above event, I hereby freely agree to and make the following contractual representations and agreements. I ACKNOWLEDGE THAT RACQUETBALL IS AN INHERENTLY DANGEROUS SPORT AND FULLY REALIZE THE DANGERS OF PARTICIPATING IN THIS EVENT, whether as a player, official, coach, volunteer, or otherwise, and FULLY ASSUME THE RISKS ASSOCIATED WITH SUCH PARTICIPATION INCLUDING, by way of example, and not limitation: dangers associated with playing in close proximity to competitors, inadequate safety equipment, and the dangers associated with court surface inadequacies, THE RELEASEES' OWN NEGLIGENCE, the possibility of serious physical and/or mental


continued on next page

trauma or injury, or death associated with the event. For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively "Successors") I HEREBY WAIVE, RELEASE, DISCHARGE, HOLD HARMLESS, AND PROMISE TO INDEMNIFY AND NOT TO SUE the Releasees and all sponsors, organizers and promoting organizations, property owners, law enforcement agencies, public entities, special districts and properties that are in any manner connected with this event, and their respective agents, officials, and employees through or by which the event will be held, (the foregoing are also collectively deemed to be Releasees), FROM ANY AND ALL RIGHTS AND CLAIMS INCLUDING CLAIMS ARISING FROM THE RELEASEES' OWN NEGLIGENCE, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in or association with the event, or travel to or return from the event. I agree it is my sole responsibility to be familiar with the event courts and agenda, the Releasees' rules, and any special regulations for the event and agree to comply with all such rules and regulations. I understand and agree that situations may arise during the event which may be beyond the control of the Releasees, and I must continually compete and otherwise participate so as to neither endanger myself nor others. I accept responsibility for the condition and adequacy of my equipment, any equipment provided for my use, and my conduct in connection with this event. I will wear an eye guard which satisfies the requirements of the Releasees' Participant Rules or Regulations and that can protect against serious eye injury, and assume all responsibility and liability for the selection of such an eye guard.

I have no physical or medical condition which would endanger myself or others if I participate in this event, or would interfere with my ability to safely participate in this event. I understand that drug testing may be conducted for athletes registered for this event.

I agree, for myself and my Successors, that the above representations are contractually binding, and are not mere recitals, and that should I or my Successors assert a claim contrary to what I have agreed to in this contract, the claiming party shall be liable for the expenses (including legal fees) incurred by the Releasees in defending the claims. This contract may not be modified orally, and a waiver or modification of any provision shall not be construed as a waiver or modification of any other provision herein or as a consent to any subsequent waiver or modification. I consent to the release by any third party to Releasees and their insurance carriers of my name and medical information that may relate solely to any injury or death I may suffer arising from the event. Every term and provision of this contract is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable.

I give the USA Racquetball, the absolute right and permission to use my photograph in its promotional materials and publicity efforts. I understand that the photographs may be used in a publication, print ad, direct-mail piece, electronic media (e.g. video, CD-ROM, Internet/WWW), or other form of promotion. I release USA Racquetball, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use. I am 18 years of age or older.

Must Sign:  _____ / ____ / ____
Signature of Entrant *age* *date*

CONSENT AND RELEASE OF PARENT OR GUARDIAN

I am the parent or guardian of _____ (Child). My Child is fit for the event, and I consent to my Child's participation. I HAVE READ AND I UNDERSTAND THE ABOVE CONTRACT. In consideration of allowing my Child to participate,

I consent to the contract and agree that ITS TERMS SHALL LIKEWISE BIND ME, MY CHILD, and our heirs, legal representatives, and assignees. I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS THE RELEASEES FROM EVERY CLAIM AND ANY LIABILITY that I or my Child may allege against the Releasees (including reasonable legal fees and costs) as a direct or indirect result of injury or death to me or my Child because of my Child's participation in the event, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES or others. I PROMISE NOT TO SUE RELEASEES on my behalf or on behalf of my Child regarding any claim arising from my Child's participation in the event. I give the USA Racquetball, the absolute right and permission to use my child's photograph in its promotional materials and publicity efforts. I understand that the photographs may be used in a publication, print ad, direct-mail piece, electronic media (e.g. video, CD-ROM, Internet/WWW), or other form of promotion. I release USA Racquetball, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use.

Must Sign:  _____ / ____ / ____
Signature of Parent or Guardian *date*

Make sure to fill in everything (both sides):
Make Checks Payable To:
Cascade Athletic Club
Mail To: c/o USAR Regionals
Cascade Athletic Club
19201 SE Division Gresham, OR 97030