16th Annual U of M Handball Classic
November 20-21, 2009

EVENT LOCATION: University of Minnesota Recreation Center Handball Courts

AMENITIES: Tournament shirt, Friday night hospitality, Saturday lunch-hour hospitality, free towel and locker service.

PLAYING TIME: Competition will begin on Friday at 4:00pm. *Draws will be emailed out and placed on MSHA website on Tuesday, November 17 at 5:00pm.*

AWARDS: Awards to First and Second place and Consolation Champions in all divisions.

RULES: All divisions will be standard USHA scoring- two out of three games to 21points with an 11-point tiebreaker. Protective eyewear is mandatory.

REFEREES: Losers officiates the next match on the court on which he/she just played. Volunteer officials are also needed.

ENTRY ADDRESS: U of M Handball Classic, 1900 University Ave. SE, 108 Cooke Hall, Mpls., MN 55455: Attn: Matt Johnson. Make checks payable to: University of Minnesota.

DEADLINE: All entries must be received on or before Thursday, November 12th, 2009.

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UNIVERSITY OF MINNESOTA 2009 U of M HANDBALL CLASSIC ENTRY FORM

Please circle the event in which you wish to participate:

Open	Novice
A	Women
B	Golden Master (50+)
C	Super Master (60+)
Collegiate (invitational)	

ENTRY FEE:

Adult:	*$40*
Students	*$15*

***Please consider a donation to the U of M Handball Program. All donations will go entirely toward travel expenses for the National Collegiate Tournament in Phoenix, AZ; gloves; balls; and other equipment.**

ENTRY FEE _____

U of M Handball Club Donation _____

AMT. ENCLOSED _____

NAME _____ **PHONE** _____

CITY _____ **STATE** _____ **E-MAIL** _____ **SHIRT SIZE** _____

In consideration of the opportunity to participate in the 2009 University of Minnesota Handball Classic, I, on behalf of myself, my agents, heirs and next-of-kin, hereby release and hold harmless the University of Minnesota and its respective agents, employees, and representatives from any responsibility or liability for personal injury, including death or damage to or loss of property, that I may incur due to the negligence of the University, my own negligence or accidents that occur while I am participating in this event. I certify that to the best of my knowledge I have no physical disabilities, impairments, or chemical dependencies that would prevent or inhibit my participation in this event. I the undersigned am at least 18 years of age and competent to sign (or have had a legal guardian sign) this release. I have read carefully and understand all of its terms.

_____ _____

Signature or Parent/Guardian Date

Disability accommodations will be provided upon request; this publication is available in alternate formats by calling Matt Johnson at 612- 626-0696.
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