

# SMASH TT

Impact Your Life!

## XIOM® SPRING 2015 ROUND ROBIN TABLE TENNIS TOURNAMENT

### Event Details:

12 x groups of 3 to determine A, B and C division

2 x groups of 6 (A division); 2 x groups of 6 (B division) ; 2 x groups of 6 (C division)

Top 2 in each A division play semi-finals and Final.

Top player in each B division play B final

Top player in each C division play C final

### Prize:

Prize A Winner \$250, Runner-Up \$120, Losing Semi \$60—plus Trophies

Prizes B and C: Winners and Runner-Up both receive

XIOM Acro FL Blade, XRC Case, Vega Asia Black and Red 1.8 mm rubbers, ball case plus Trophies.

### Referee:

Michael Levene

### Rules:

Zero Star Sanctioned & Rated USATT Tournament. USATT Regulations Apply.

Including paddle and dress code.

### Equipment:

XIOM tables, nets & 3-star white XIOM plastic balls subject to availability, red rubber floors. ITTF/USATT approved equipment only.

### Ratings:

Ratings one week prior to the tournament day will be used for event eligibility.

### Membership:

Proof of USATT membership is required. Memberships may be purchased at the tournament.

Adult membership is \$49/year or \$130/3 years. Junior membership is \$25/year (17 yrs. or younger) or \$60/3 years (14 yrs. or younger). One time Tournament pass for first time tournament player is \$10.

**Hotel:** Hyatt Place Sterling/Dulles Airport-North 21481 Ridgetop Circle, Sterling VA 20166. Call Rachel Thomas at . +1 703.234.0347 for best rate

**When:**

**March 22nd, 2015**

**Time:**

**From 9.00 am**

**Address of Event:**

**Smash Table Tennis Center**

21620 Ridgetop Circle,  
Suite 195 Sterling, VA 20166

Telephone: 678-682-1907

[www.smashtt.com/facilities](http://www.smashtt.com/facilities)

**Cost:**

**\$35/per person**

(up to 36 entries)

**Event Director:**

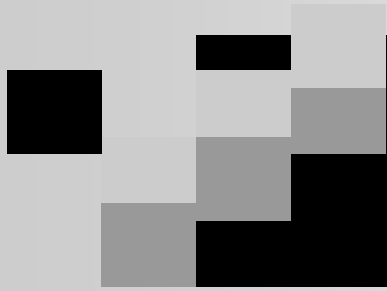
**Zibing Wang**

Email: zibingw@gmail.com

Phone: 678-525-0269

**Entry Deadline:**

**March 20<sup>th</sup>, 2015.**



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## SPRING 2015 ROUND ROBIN TABLE TENNIS TOURNAMENT

### Entry/Payment Form

Name: \_\_\_\_\_ Date of Birth : \_\_\_\_\_  
First Last

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

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

Payment can be made by check (payable to Smash Table Tennis), Via PayPal: send payment to [michael@smashtt.com](mailto:michael@smashtt.com) or by completing the following credit card information

Billing Address (if different from above)

\_\_\_\_\_

CC#: \_\_\_\_\_ Exp Date: \_\_\_\_\_ 3-digit code \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

By entering this tournament, I hereby release the sponsors, directors, and any individual or corporate body directly or remotely connected with this tournament from any and all actions, claims and demands resulting from loss, damage, or injuries sustained to persons or property. I will abide by USATT regulations.

Events Fees:	\$35
USATT Rating/Reg. Fee:	\$10
USATT Membership Fee:	\$ _____
<b>Total:</b>	\$ _____

Adult membership is \$49/year or \$130/3 years. Junior membership is \$25/year (17 yrs. or younger) or \$60/3 years (14 yrs. or younger). One time Tournament pass for first time tournament player is \$10.

Entries and full payment can be sent to: Michael Levene - 23406 Virginia Rose Place, Ashburn, VA 20148