



Indiana State Pool Tournament 2014

Official Tournament Entry

STATEMENT OF ACCURACY AND COMPLIANCE

Read, sign and date the statement at the bottom of this page.

On the Tournament Entry form please **Copy** forms first then, fill in names, games played and team playing on.

Please print clearly or type all entry forms.

If for any reason the players entered are entered in the wrong division, the tournament director will place them in their proper division and bill the appropriate operator the balance of the entry fees.

Please return all entries to IAMOA Office on or before **February 14, 2014**.

STATEMENT OF ACCURACY AND COMPLIANCE

I have accurately submitted statistics that represent the actual ratings achieved in my local league system for each player entered. Each of the leagues that qualified the players were played exclusively on our company's machines. I do understand that if I have misrepresented, omitted, or falsified any information regarding tournament entries, my future Tournament entries will be reviewed and may be rejected, at the discretion of the tournament committee, and that tournament entries are a privilege extended only to members in good standing. The penalty for falsification of tournament entries and or tournament statistics to enter players is a **one** year penalty for the operator & or league coordinator. Based on facts presented to the Board of Directors for the IAMOA they will make the final decision or decisions of the future of this charter holder.

Signature of Operator

Print Name

Date



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ORDER DEADLINE: February 14, 2014

Initial Order Additional Order

Company Name

Phone Number

1. Authorized representatives' completing of this form binds the Member company and participating team(s) to the NDA's Code of Ethics and Enforcement Code. Any false statements may impact team(s) and charter.
2. League statistics from the beginning, middle and ending week of sanctioned league seasons must be on file for teams to be eligible for entry.
3. Review and adherence to all eligibility and participating guidelines, including proper game format, are assumed upon signature. Details can be found in this Tournament Kit.
4. Complete this entry form and your official certificates will be returned by mail.

I have read the statements above and agree to abide by them.

Printed Name

Signature

SINGLES EVENTS		
	<i>Quantity</i>	<i>Total</i>
Open Masters Singles	___ X \$80	\$
Open A-Division	___ X \$70	\$
Open B-Division	___ X \$60	\$
Ladies Masters Singles	___ X \$70	\$
Ladies Singles	___ X \$60	\$
Singles Subtotal		\$
DOUBLES EVENT		
Junior Doubles	___ X \$10	\$
Doubles Subtotal		\$
TEAM EVENT		
Open Masters Team	___ X \$350	\$
Open A-Division	___ X \$250	
Open B-Division	___ X \$200	
Ladies Masters Team	___ X \$280	
Ladies Team	___ X \$180	
Team Subtotal		\$
TOTAL DUE		\$

PAYMENT INFORMATION

Credit Card Check
(Mail check payable to the IAMOA)

Credit Card Number

Expiration Date

Name (as it appears on card)

Signature

Payment must accompany all orders.

**Please send all completed forms to:
IAMOA, 9100 Purdue Rd., Ste. 200
Indianapolis, IN 46268**