

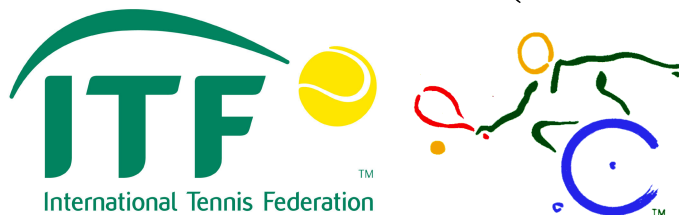


**DURHAM & CLEVELAND LTA
PRESENT**

**NORTH EAST
WHEELCHAIR TENNIS TOURNAMENT
18th – 21st MARCH 2010**

at

**Durham & Cleveland County Tennis Centre,
Sunderland Tennis Centre (formerly Puma).**



ITF 3 SERIES EVENT

Part of the NEC Wheelchair Tennis Tour.

ENTRY FORM

Tournament Committee

John Schofield, Viv Wilson, Bill Perkins

**Tournament sanctioned by NWTA, The Tennis Foundation
and The International Tennis Federation**

**THE NORTH EAST WHEELCHAIR TENNIS TOURNAMENT
PRESENTED BY
DURHAM & CLEVELAND LAWN TENNIS ASSOCIATION
at
DURHAM & CLEVELAND LTA COUNTY CENTRE, SUNDERLAND
18 – 21st March 2010**

ENTRY FORM

NAME _____

ADDRESS _____

POST CODE _____

TELEPHONE _____ day _____ evening _____

Email Address: _____ IPIN No.

PREFERRED DIVISION (please tick)

Divisions are dependent on entries and may be combined.

Men's Open (Main Draw) <input type="checkbox"/>	Second Draw <input type="checkbox"/>	Quad (Main Draw) <input type="checkbox"/>	
Ladies Open (Main Draw) <input type="checkbox"/>			
Mens Doubles <input type="checkbox"/>	Ladies Doubles <input type="checkbox"/>	Quad Doubles <input type="checkbox"/>	

DOUBLES PARTNER.....(Please agree with the person before submitting the entry form)

ROOMING PARTNER.....(If not specified, tournament secretary will arrange)

I enclose the entry fee of for the North East Wheelchair Tennis Tournament, plus for the appropriate hotel accommodation.

Total: _____ (Please make cheques payable to: **"Durham & Cleveland LTA"**)

Signed.....Date.....

RETURN TO: Mr J.L.Schofield, 23 Welbury Close, Hartburn, Stockton-on-Tees, TS18 5LJ

CLOSING DATE FOR ENTRIES: FRIDAY 19th FEBRUARY 2010

ITF 3 SERIES EVENT

Part of the NEC Wheelchair Tennis Tour

ALL PLAYERS MUST AGREE AND SIGN THE FOLLOWING CLAUSE:

I hereby agree to abide by the ITF Rules of Tennis, the ITF Rules of Wheelchair Tennis and pay the entry fee as required by the tournament. I confirm that I have read and understood Article 7 of the Wheelchair Tennis Handbook 2010 and further that in accordance with Article 12(i) of the same that I have adequate travel and medical insurance. I further agree to abide by the ITF Code of Conduct in all Main Draw events or by the Code of Conduct adopted by the tournament in any other draws. I also agree for participation in the tournament to be bound by and comply with the all the provisions of the ITF Tennis Anti-Doping Programme 2010 I note that the Tennis Anti-Doping Programme is set out in full on the ITF website (www.itftennis.com) and in a separate rulebook that is published and distributed to all the National Associations and is also available upon application.

NAME:		SIGNED:		DATE:	
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**NORTH EAST WHEELCHAIR TENNIS TOURNAMENT
18th – 21st MARCH 2010**

ACCOMMODATION / TRANSPORTATION FORM

Name:	
Everyday Wheelchair user? (Please tick)	<input type="checkbox"/> Yes <input type="checkbox"/> No

ACCOMMODATION	(Please tick)
Name of Rooming Partner	
All accommodation is from Wednesday 17 th March – Saturday 20 th March inclusive. If additional nights accommodation are required please send your request in writing.	<input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Double
I DO NOT require Accommodation	<input type="checkbox"/>

TRANSPORTATION	
I will travel by car:	Vehicle Registration:
I shall be travelling by plane:	To Newcastle International Airport <input type="checkbox"/>
	To Teesside International Airport <input type="checkbox"/>
	Flight No. _____ Arrival Time _____
	Departure Date ____/____/____
	Flight No. _____ Departure Time _____
	Number of Chairs: _____
Airport Transfers	<p>Pick-ups, if required, will only take place from the above two airports on Wednesday 17th March and drop-offs on <u>Sunday 21st March between 9am-11pm</u></p> <p>Required Yes No</p> <p>Transfers from any other UK airport will not be provided and will be at the individual's expense. Transfer time to the hotel from Newcastle is Approximately 25 minutes and from Teesside approximately 40 minutes.</p>