



2013 NATIONALS 8 & 9-BALL SINGLES REGISTRATION FORM

PLAYERS / LICENSEES: Please complete this form and submit with the payment to be received by SEPT. 30th. No Entries will be accepted after this date/midnight, no exceptions or sign-ups will be taken at this event. All Checks should be submitted, with this form made payable to TAP, LLC and sent to P.O. Box 574, Halifax, PA 17032. NO FAXES PLEASE. Email kelly@tapleague.com with any questions.

PLAYERS MUST HAVE A CURRENT TAP MEMBERSHIP CARD WITH THEM, OR THEY WILL NOT BE ALLOWED TO PLAY. ID CAN BE VERIFIED BY THE OPPONENTS IN YOUR EVENT.

Fee is \$125 per PLAYER for ALL Handicap Brackets. This form is for 8 and 9 Ball, please circle appropriate box. Registrations are non refundable, but are transferable by the deadline of Sept. 30th. Must meet all national qualifications and requirements, please see rule book. Singles Events are Double Elimination.

LICENSEE / OPERATOR NAME:	LICENSEE ID #
LICENSEE TERRITORY/ LEAGUE NAME:	STATE/PROV.

PLAYER NAME:
PLAYER EMAIL:
PLAYER PHONE:

8-BALL SINGLES HANDICAP BRACKET (PLEASE CIRCLE)

FEE \$125.00	HANDICAP 2	HANDICAP 3	HANDICAP 4	HANDICAP 5	HANDICAP 6	HANDICAP 7
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9-BALL SINGLES HANDICAP BRACKET (PLEASE CIRCLE)

FEE \$125.00	HANDICAP 2-3	HANDICAP 4-5	HANDICAP 6-7
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MEMBER / PLAYER ID #:	HANDICAP LEVEL:
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ARE YOU IN THE TEAM EVENT ALSO? IF YES IS IT ONE TEAM OR TWO (PLEASE CIRCLE)

ONE TEAM

TWO TEAMS

TEAM NAMES :

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THE BELOW INFORMATION IS FOR OFFICE USE ONLY:

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