

## 2025 RALLY IN THE VALLEY 8 BALL SCOTCH DOUBLES FORM

PLAYERS / LICENSEES: Please complete this form and submit with the payment By March 11<sup>th</sup>. 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 5 ROUNDHILL, VA 20142. NO FAXES / NO EMAILS PLEASE. Email <u>TiffanyDrahos@tapleague.com</u> and <u>Celeste@tapleague.com</u> with any questions.

PLAYERS MUST HAVE A CURRENT TAP MEMBERSHIP ON TAP THE PHONE APP, OR THEY WILL NOT BE ALLOWED TO PLAY. ID WILL BE VERIFIED BY THE OPPONENTS IN YOUR EVENT.

Fee is \$250 per TEAM. NO REFUNDS, No Exception - Only TRANSFERS.

Players must have a minimum of 6 matches played together in <u>weekly</u> play and /or tournaments held by licensees with score sheets through Pool Net from Oct 29<sup>th</sup> to March 11th. MUST HAVE 10 LIFETIME MATCHES. Scotch Doubles. Event is Round Robin To Single Elimination. All Handicaps Play in Two Brackets 2/3/4 & 5/6/7, unless the total number of participants does not justify it.

Race per 8 Ball Grid. Limited to 32 Teams.

SCOTCH DOUBLES STARTS April 8th at 6 p.m.

LICENSEE / OPERATOR NAME:				LICENSEE ID #			
LICENSEE TERRITORY/ LEAGUE NAME:				STATE/PROV.			
PLAYER NA	ME:						
PLAYER EM	IAIL:						
PLAYER PHONE:				SMART PHONE/TABLET? Y or N MUST USE THE APP			
8-BALL SINGL	_ES_HANDICAP BR	ACKET ( PLEASE	CIRCLE)				
FEE \$250.00	HANDICAP 2/3	HANDICAP 4	HANDICAP 5	HANDICAP 6	HANDICAP 7/8		
MEMBER / PLAYER ID #:				HANDICAP LEVEL:			
	ISE NAME AND TAF		PLAYER WHO V	/ILL BE KEEPING	SCORE FOR YO	U USING	
TAP THE APP. APP MUST BE USED. PLAYER NAME:				TAP ID NUMBER			
ARE YOU IN T	HE TEAM EVENT A	LSO? IF YES IS I	T ONE TEAM OR	TWO (PLEASE (	CIRCLE)		
ONE TEAM				TWO TEAMS			
TEAM NAMES	S:						
THE BELOW I	NFORMATION IS FO	OR OFFICE USE (	ONLY:	А	l R		