

# NORTH SHORE OPEN

July 21-22, 2017



**Deadline:** Entries must be postmarked by July 6 or given to Shannon by July 9th. Late entry fee \$10.

**Director:** Shannon Pohl • 847.722.8857 • badminton@shannonpohl.com

**Venue:** Adversity Volleyball Center • 710 Corporate Woods Parkway • Vernon Hills, IL 60061

**Eligibility:** Open to everyone! Both adults and juniors of all levels are encouraged to participate.

**Format:** MS, WS, MD, WD, XD  
ABCD Dropflight. (All players are guaranteed 3 matches per event)  
3 event limit  
Events best 2 of 3 games to 21 points per USA Badminton rally scoring

**Conditions:** Each player in a doubles event must submit a separate entry  
10 minute match/event default—No Refund  
Events may be modified or canceled  
Appropriate badminton attire / non-marking shoes

**Entry Fee:** \$30 for the first event, \$15 for each additional event. 3 event maximum. Checks may be payable to “Shannon Pohl.” Payment must accompany entry. Email entries must have payment made via paypal to badminton@shannonpohl.com. Withdrawals after the entry deadline of July 6th due to illness or injury must be supported by medical certificate in order to have entry fee refunded. Withdrawals after the entry deadline (July 6th) for any reason other than a documented medical condition precluding play shall result in forfeiture of the entry fees. Please notify Shannon in writing of withdrawals at badminton@shannonpohl.com

**Awards:** Awards to first and second place finishers in each flight.

**Shuttles:** One feather shuttle will be provided per match. Additional shuttles will be available for purchase at the tournament.

<b>Schedule:</b>	Friday:	6:00 p.m.	Registration - Men’s and Women’s Singles
		6:30 p.m.	Play Begins for Men’s and Women’s Singles.
	Saturday:	8:30 a.m.	Registration Men’s and Women’s Doubles
		9:00 a.m.	Play Begins for Men’s and Women’s Doubles
		12:30 p.m.	Registration - Mixed doubles
		1:00 p.m.	Play Begins Mixed Doubles

*\*schedule subject to change.*

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**Concessions:** Concessions available. No outside food permitted in the facility.

**Pro-Shop & Stringing:** The SPBA Pro Shop will be open with rackets, shoes, shuttles, grips, bags, apparel, badminton jewelry, etc. available for purchase. Stringing services will be available

## Hotels

**Hampton Inn & Suites:** 1400 Milwaukee Avenue • Lincolnshire, IL 60069 • 847.478.1400  
• 6 minutes from venue • free wired internet  
• pool and whirlpool • fitness center  
located near shopping plaza, restaurants, nightlife, and IMAX theatre  
Next to Player Party / Dinner

**Hilton Garden Inn:** 26225 North River Woods Boulevard • Lake Forest, IL 60045 • 847.457.2483  
7 minutes from venue • free wi-fi internet • pool and whirlpool • fitness center  
microwave and refrigerator in room

## Player Party/Dinner

Let's get together with badminton friends, coaches, families, and spectators to celebrate another great year of badminton! I hope you can make it!

**When:** July 22th • Saturday night • 7:00 pm

**Location:** Big Bowl Restaurant (Fresh Chinese & Thai)  
215 Parkway Drive  
Lincolnshire, IL 60069

**Price:** \$32 for appetizers and entree (including tax and gratuity). Drinks not included.

**Age:** All ages are welcome!

## Rackets for Uganda

The SPBA has been able to collect hundreds of rackets and shuttles over the past few years for our Rackets for Uganda Program! Shannon is currently fundraising to cover the expenses of bringing this equipment to Uganda this September and running a clinic for the locals this year. Please consider making a contribution of any size towards this cause! Thank you!

# NORTH SHORE OPEN



**Entry fee payable to “Shannon Pohl”**  
 \$30 entry fee for first event, \$15 for each additional event  
 \$10 late fee for entries postmarked after **July 6th or not given to Shannon by July 9th.**

**Mail entries to:** Shannon Pohl Badminton Academy  
 c/o Adversity Volleyball Center  
 700 Corporate Woods Pkwy.  
 Vernon Hills, IL 60047

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: M / F

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

School: \_\_\_\_\_ Club/Coach: \_\_\_\_\_

*Please enter me in the following events. Please indicate A, B, C, or D ability level to help with the draw.*

Event	✓	Ability (A,B,C, or D)	Carefully Print Partners Name or “Request”
Women’s Doubles			
Men’s Doubles			
Mixed Doubles			
Women’s Singles			
Men’s Singles			

Entry fee first event: \$30 \_\_\_\_\_

Fee for additional events: \$15 each \_\_\_\_\_

Player Party Dinner Ticket: \$32 each \_\_\_\_\_

Late Entry Fee for entries given to Shannon after July 6th: \$10 \_\_\_\_\_

Rackets for Uganda Donation: \_\_\_\_\_

Total fee included: \_\_\_\_\_



**Shannon Pohl Badminton Academy Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement")**

This Agreement is being entered into in consideration of my participation on/in North Shore Open ("Activity/Program") and hereby represent that I understand the nature of this Activity/Program and that I am qualified, in good health, and in proper physical condition to participate in such Activity/Program. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity/Program. I fully understand that this Activity/Program involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, Activity/Program, the conditions in which the event, Activity/Program takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity/Program.

I hereby release, discharge, and covenant not to sue The Shannon Pohl Badminton Academy, Adversity Volleyball Center, Shannon Pohl, its respective administrators, directors, agents, officers, volunteers, coaches, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity/Program takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and in the future agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, make a claim against any of the Releasees, I will indemnify, save, and hold harmless, each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim. Permission is also given to use my child's photo or endorsement for promotion.

The parties agree that the substantive laws of the State of Illinois shall govern all matters concerning the validity, performance, administration, and interpretation of this Agreement. The parties further agree that any judicial proceeding brought against The Shannon Pohl Badminton Academy on account of any dispute arising out of the Agreement, or any matter related hereto, shall be brought in the courts of the State of Illinois or federal courts sitting in the State of Illinois. If any term, part, or provision of this Agreement is declared illegal or invalid by a court or general jurisdiction or is superseded by a specific law or regulation, such law or regulation shall control to the extent of such conflict without affecting the remaining provisions of this Agreement and the rights and obligations of the parties.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this Agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect for a period of one (1) year from the date hereof.

Printed name of Participant \_\_\_\_\_ Signature of Participant \_\_\_\_\_

Date: \_\_\_\_\_

**PARENTAL CONSENT**

AND I, the parent and/or legal guardian of \_\_\_\_\_, the Participant, who is minor under 18 years of age ("Minor"), understand the nature of the above referenced Activities/Program and the Minor's experience and capabilities and believe the Minor to be qualified to participate in such Activity/Program and hereby agree to all foregoing terms and conditions of this Agreement, I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the Minor's account caused or alleged to have been caused in whole or in part as a result of the Minor's participation in the Activity/Program or by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite the release, I, the Minor or anyone in the Minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY<SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost and Releasee may incur as the result of any such claim.

Printed name of Parent \_\_\_\_\_ Signature of Parent \_\_\_\_\_

Date: \_\_\_\_\_

**Additional Seeding Information:**

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