

## Registration

Name: \_\_\_\_\_

Male    Female    Shirt Size: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

No online registration at this time. Submit registration & payment by mail by September 1, 2017 to 29775 Eddy Court, Oak Creek, CO 80467.

\_\_\_\_\_ Men's Doubles    3    3.5    4    4.5

\_\_\_\_\_ Mixed Doubles    3    3.5    4    4.5

\_\_\_\_\_ Women's Doubles    3    3.5    4    4.5

Partner's name: \_\_\_\_\_

\_\_\_\_\_ I am registering as a single and would like to be paired for the tournament.

\$35 for 1st event registered, \$10 additional event

Payment must accompany entry, entrants should pay for only their own entries. Checks payable to *Denise Pearson Memorial Fund*.

Total Fee Enclosed: \$\_\_\_\_\_ Cash/Check/Card

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CCV \_\_\_\_\_ Zip \_\_\_\_\_

Name on Card \_\_\_\_\_



Steamboat  
Springs  
High School



**Edward Jones**  
MAKING SENSE OF INVESTING

David Lamb, FA 970.879.7742

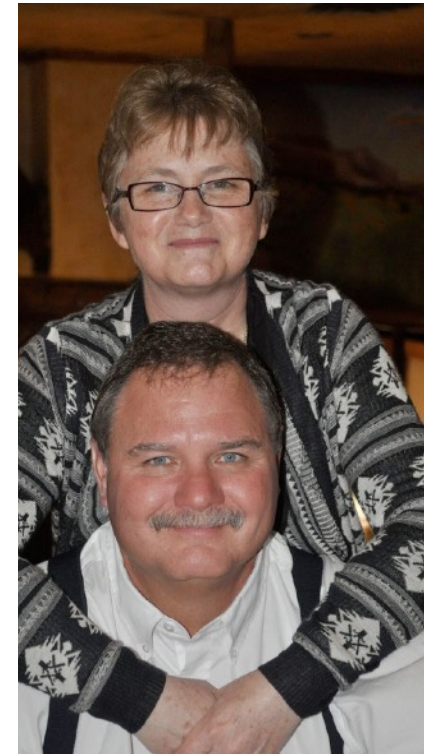


**DENISE R. PEARSON**

*Light The Night*

MEMORIAL  
PICKLEBALL TOURNAMENT

September 9 & 10, 2017



  
**THE TENNIS CENTER**  
at Steamboat Springs

2500 Pine Grove Road, Steamboat Springs  
970.879.8400

## Mom's Story

In the fall of 2015 Denise became concerned about getting abnormally tired quicker than what she expected and not being able to do the normal activities she was used to doing. She saw a few doctors and was diagnosed with MDS or Myelodysplastic Syndrome. Each month she underwent week-long injections for the next seven months until her tests indicated that her MDS had progressed to Acute Myeloid Leukemia. Mom underwent multiple rounds of chemo and a stem cell transplant in the summer and fall of 2016. Mom passed from this life to the next in January 2017 and while her fight has finished, many others battle Leukemia every day. Proceeds from the tournament will be donated to the Leukemia and Lymphoma Society in mom's name to further the fight against blood cancers, as well as to the Denise Pearson Memorial Athletic Fund to help high school students with athletic fees. Thank you for your participation from the bottom of our hearts

~ Jim, Jessica, and Christa



## The Tennis Center at Steamboat

**From Denver:** Take I-70 West to Silverthorne Exit. Turn right on Hwy 6 and continue to Kremmling (~45 minutes). At stop light, turn left onto Hwy 40 and continue over Rabbit Ears Pass into Steamboat Springs (~ 45 minutes). After the 1st stop light (Walton Creek Rd), take the 1st right onto Pine Grove Road. The six court indoor facility is immediately visible. **From Steamboat:** Head east on Hwy 40/ Lincoln Ave, turning L onto Pine Grove Road after going over the overpass.



## Tournament Format

No Schedule requests. Schedule estimated, full schedule TBD after August 1 deadline.

Tournament Check in 7:30 AM Saturday, 9/9/17

Opening greetings 8:00 AM

3.0 - 3.5 Men & Women's Doubles 8-12 Saturday

4.0 - 4.5 Men & Women's Doubles 1-5 Saturday

3.0 - 3.5 Men & Women's Mixed 8-12 Sunday

4.0-4.5 Men & Women's Mixed 1-5 Saturday

## Tournament Director

Jessica Koppe  
djjam@live.com

## Player Liaison

Christa Ikard  
c.l.ikard@hotmail.com

[alex7jesuis.wixsite.com/drpltn](http://alex7jesuis.wixsite.com/drpltn)

**Medical Release:** I hereby consent to emergency medical and/or hospital service that may be rendered by or at accredited hospitals by appointed physicians in the event such need arises in the opinion of a duly licensed physician. Waiver and **Indemnity Agreement:** Acceptance of my entry in these events is without responsibility of any kind by the Tennis Center at Steamboat, The Denise R Pearson Light The Night Memorial Pickleball Tournament (Tournament) and any other entity sponsoring the event. I do hereby for and on behalf of my heirs and legal representatives RELEASE and forever discharge the Tennis Center at Steamboat, its officers and representatives, representatives of the SSPA, representatives of the Tournament, representatives of the sponsoring entities, or by third parties, which injuries may be in any way related to my activities during the Tournament and any period traveling to and from the events described and all such claims are hereby waived and released and covenant not to sue therefor. Additionally I accept and understand that the Tennis Center and the Tournament may use my photo or image in promotional endeavors.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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