



SENIOR CUP APPLICATION

Name: _____ USTA # _____

Address: _____

Phone: _____ Cell phone: _____

Date of birth: _____ Age _____ Shirt Size _____ S M L XL 2XL

Email _____

Are you willing to play singles if necessary? Yes _____ No _____

Gender _____ Age Category: _____ Will you need the small stipend? Yes _____ No _____

Email address: _____ Date: _____

On line Tournament fee is \$10 per player---Are you willing to be a captain your age group? Yes or No

DEADLINE: April 1

Please mail or fax this form to:
Mississippi Tennis Association
P. O. Box 5388
Jackson, MS 39296
Phone: 601-981-4421 FAX: 601-981-4517

Contacts:

email: Kent Shultz: 601-981-4421 or Cell: 601-918-5091; email: KentS@mstennis.com
Men's Captain : John Cox 662-843-8351; email: OkraLaw@yahoo.com
Women's Captain : TBD

WHEN: June 5-7(some may start June 4) WHERE: Pellam Racquet Club, Pellam, AL