



We Play To Remember

**HOUSTON ALZHEIMER'S BENEFIT
PICKLEBALL TOURNAMENT
PALA Pickleball July 11-14, 2023**

REGISTRATION FORM

Name: _____ **Sex:** Male () Female ()

Tel: _____ **Email:** _____ () **T-Size** _____

Address: Street _____ City _____ ST. _____ ZIP _____

DATES: **MD** – July 11 **WD** – July 12 **MXD** - July 13 & 14

Event 1: () MD 18-34 () MD 35-49 () MD 50-64 () MD 65+ () WD 18-34 () WD 35-49
() WD 50-64 () WD 65+ () MXD 18-34 () MXD 35-49 MXD 50-64 () MXD 65+

Partner: _____ () **T-Size** _____

Event 2: () MD 18-34 () MD 35-49 () MD 50-64 () MD 65+ () WD 18-34 () WD 35-49
() WD 50-64 () WD 65+ () MXD 18-34 () MXD 35-49 MXD 50-64 () MXD 65+

Partner: _____ () **T-Size** _____

Fees: \$45 each for 1 Event & \$5 for 2nd Event \$50 After 6/24/23 Refunds Till 6/30

PAYMENT: () **Tournament T-Shirts: \$10 each (Indicate sizes above)**

CASH OR CHECKS: Enclosed: \$ _____ (Make Checks Payable to: Mike Goldberg)

CREDIT CARDS: CARD TYPE: () AMEX () VISA () MASTERCARD (\$2 charge for credit)

Address _____ **City** _____ **State** _____

Cardholder Name _____ **Tel. No.** _____ **ZIP Code** _____

Account Number _____ **CVV Code** _____ **Exp. Date** _____

Mail Entries To: Katy Pickleball, 20307 Monkswood Dr., Katy, TX 77450

ALL PLAYERS MUST GO TO: [Create Account & Request Access For PALA Pickleball | powered by CourtReserve](#)

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- DIADEM SPORTS - TEXAN INSURANCE -
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