16th Annual Raleigh "Power Peggers" March Madness Cribbage Classic Director – Larry Phifer

The 156h Annual Raleigh "Power Peggers" March Madness Cribbage Classic will be held Friday, Saturday, and Sunday, March 17, 18, and 19, 2016 at the Ramada Inn, 1520 Blue Ridge Rd., Raleigh, NC 27612. Call the hotel at 800-441-4709 or 919-832-4100 to receive the cribbage rate of \$65 a night. For those who want 1st floor rooms, call early. Sanctioned by the American Cribbage Congress - Master Points will be awarded in the main and consolation tournaments to ACC members. Muggins will apply in all events of the weekend.

Main Tournament Saturday - Sunday (March 18th & 19th)

| | - \$05 (Inc | cl. \$3 sanction fee; lunch is included); no Q-Po | ool. |
|---|--|---|---|
| Registration | - 8:00 - 8 | 3:30 AM | |
| Tournament Start | - 8:30 AN | | |
| Play | | nes vs 22 opponents (muggins in effect through | |
| Playoffs | | % will qualify for the playoffs. Best 3 of 5. Sk | |
| D 1 1 | | s on Sunday start at 8:00 AM. First round may | be Saturday afternoon. |
| Payback | - Main & | c Consolation Tournaments: Minimum of 85% | |
| Consolation Tour | nament Sunday | (March 19th) | |
| Registration Fee | - \$30.00 | (Incl. \$1 sanction fee; no Q-pool) | |
| Registration | | 8:30 AM - 9:15 AM | |
| Tournament Start | - 9:15 AN | M Approximately - Upon completion of 1st rou | nd Main Playoffs. |
| Play | | s vs 9 opponents (muggins in effect throughout | |
| Playoffs | - Top 259 | Top 25% will qualify for the playoffs. Best 2 of 3. Skunks equal 1 game. | |
| | Playoffs | s will start no later than 1:00 PM. | |
| Other Events | | | |
| Friday Early Bird | - Registra | Registration 7:00 PM, Play 7:30 PM, \$30 Entry, 9 games, pays 1/4 (No Q-pool) | |
| Sat. Night Special | - Registra | Registration 7:00 PM, Play 7:30 PM, \$30 Entry, 9 games, pays 1/4 (No Q-pool) | |
| Raleigh March | Madness Regi | istration Form | |
| Raleigh March | | istration FormPHONE: (_ |) |
| NAME: | | |) |
| NAME: | | PHONE: (_ | |
| NAME: | | | |
| NAME:ADDRESS: | \$65.00 X | | ZIP: make checks payable to: |
| NAME: ADDRESS: CITY: Main Tournament: Friday Night | \$65.00 X \$30.00 X | | ZIP: l make checks payable to: uifer hmark Dr. |
| NAME:ADDRESS:CITY:Main Tournament: | \$65.00 X \$30.00 X | | ZIP: |
| NAME: ADDRESS: CITY: Main Tournament: Friday Night | \$65.00 X \$30.00 X \$30.00 X | | ZIP: |
| NAME: ADDRESS: CITY: Main Tournament: Friday Night | \$65.00 X \$30.00 X | | ZIP: |
| NAME: ADDRESS: CITY: Main Tournament: Friday Night Saturday Night | \$65.00 X \$30.00 X \$30.00 X Total | | ZIP: |
| NAME:ADDRESS:Main Tournament: Friday Night Saturday Night I agree to abide by the | \$65.00 X \$30.00 X \$30.00 X Total | | ZIP: |