



AUTUMN OPEN

SEPTEMBER 29 – OCTOBER 1, 2017



BUDGETEL Inn & Suites: 2295 E. Irlo Bronson Memorial Highway
 Kissimmee, Fl. For reservations, phone 407-978-6602
Ask for the Cribbage rate of \$69 if booked by September 1st.

SCHEDULE OF EVENTS

MUGGINS WILL BE IN EFFECT FOR ALL GAMES

25% of all players qualify for all events.

(\$1 per player removed for expenses for Friday & Saturday nights)

Main Event Entry Fee includes ACC Sanction \$3 Fees & Consolation \$1 Fees.

NO LUNCH WILL BE SERVED – THERE ARE SEVERAL RESTAURANTS NEARBY INCLUDING THE HOTEL.

| FRIDAY DOUBLES ▶ | \$20 Entry Fee | 9 Games/9 Opponents | Noon Registry/1PM Play |
|---|--|---|---|
| FRIDAY NIGHT | SATURDAY MAIN | SATURDAY SOCIAL | SUNDAY CONSOLATION |
| 6:30PM Registration 7:30PM Play Begins | 7:15AM Registration 8:15AM Orientation 8:30AM Play Begins | 6:30PM Registration 7:30PM Play Begins | 8:30AM Registration 9:00AM Play Begins |
| \$40 Entry Fee | \$63 Entry Fee <i>Cash Walk-Ins Welcome!</i> | \$25 Entry Fee | \$40 Entry Fee (Cash) |
| Side Pools Available | \$20 Q Pool Equal Payout | Side Pools Available | Side Pools Available |
| 9 Games/9 Opponents | 22 Games/22 Opponents | 9 Games/9 Opponents | 9 Games/9 Opponents |
| | Main First Round Playoffs: Best 3 of 5 Time TBA Championship Playoffs: Sunday @ 7:30AM Best 3 of 5 | | Consolation Playoffs: TBA Best 2 of 3 |

AUTUMN OPEN FORM

*Please make checks payable to: Charlene Cohen – 2011 Oak Street, St. Cloud, Fl. 34769 email: ccshop2save@gmail.com
 Phone: 321-431-0950*

NAME: _____ ACC#: _____
 NAME: _____ ACC#: _____
 ADDRESS: _____ EMAIL: _____
 CITY, STATE, ZIP: _____ PH: _____

Please Indicate the Number of People Registering for Each Event:

Friday Doubles: _____ x \$20 = _____

Friday Night: _____ x \$40 = _____

Saturday Main: _____ x \$63 + \$20 Q = _____

Saturday Night: _____ x \$25 = _____

Check Total \$: _____

Anchor Seat Required? Y: _____ N: _____

I will serve as a Judge? Y: _____ N: _____

I agree to abide by the ACC and Tournament Rules: _____ Signed