**[ALL INDIA TENNIS ASSOCIATION]**

|  |  |
| --- | --- |
| NAME OF THE TOURNAMENT | **CHAMUNDA-AITA CHAMPIONSHIP SERIES-7 DAYS (CS-7) Boys & Girls U-14 & 16****An event by Chamunda Sports Foundation** |
| NAME OF THE STATE ASSOCIATION | **HARYANA TENNIS ASSOCIATION** |
| HONY. SECRETARY OF ASSOCIATION | **Mr. SUMAN KAPUR** |
| ADDRESS OF ASSOCIATION | **kapursuman@yahoo.com** |
| TOURNAMENT WEEK | **WEEK : 23 OCTOBER 2017****ENTRY DEADLINE : 02 OCT 2017****WITHDRAWAL : 16 OCT 2017** |

DRAWS & MATCH SCHEDULE CAN BE SEEN BY 8 PM ON FACEBOOK PAGE -[**WWW.FACEBOOK.COM/CHAMUNDA**](http://WWW.FACEBOOK.COM/CHAMUNDA)**KARNAL**

|  |  |
| --- | --- |
| THE ENTRY IS TO BE SENT BY EMAIL ONLY 🡪 | **Mr JK SHARMA****9810193462, 8295512640****karnalchamunda@gmail.com** |
| ADDRESS | **CHAMUNDA TENNIS ACADEMY****C/O – CHAMUNDA AGRO FARMS****Noor Mahal-Radha Soami Road,****KARNAL CITY (Haryana)** |
| **ROUTE FROM CHANDIGARH**: turn left from Nirmal Kutia Chowk/ Noormahal Crossing , cross Noor Mahal chowk and keep straight, turn right from the T-point towards Radha Soami Satsang Bhawan. After 100 mts. you will reach the venue  | **ROUTE FROM DELHI**: turn right from Nirmal Kutia Chowk/ Noormahal Crossing , cross Noor Mahal chowk and keep straight, turn right from the T-point towards Radha Soami Satsang Bhawan. After 100 mts. you will reach the venue  |
| TOURNAMENT DIRECTOR | **MR. J K SHARMA****KARNALCHAMUNDA@gmail.com****+91 9810193462, 8295512640** |
| CATEGORY (✓) | N | ( ) | NS | ( ) | SS | ( ) | CS | (✓ ) | TS | ( ) |
| AGE GROUPS (✓) | U-12 | ( ) | U-14 | (✓) | U-16 | (✓ ) | U-18 | ( ) |
|  | Men’s | ( ) |  | Women’s |  | ( ) |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SIGN-IN DATE & TIME** | **QUALIFYING****20/10/2017****12-2 pm** | **OPEN DRAW** | **MAIN DRAW****22/10/2017****12-2 pm** | **32** |
| MAIN DRAW SIZE | Singles | **32** | Doubles | 16 |
| QUALIFYING DRAW SIZE | Singles | Open | Doubles | NA |
|  |  |  |  |  |
| ENTRY DEADLINE | 02/10/2017 | WITHDRAWAL DEADLINE | 16/10/2017 |

|  |  |
| --- | --- |
| NAME OF THE VENUE | **CHAMUNDA TENNIS ACADEMY** |
| ADDRESS OF VENUE | **C/O – CHAMUNDA AGRO FARMS****Noor Mahal-Radha Soami Road,****KARNAL CITY (Haryana)** |
| TOURNAMENT REFEREE |  MR MAYANK KRISHNATRE |
| TELEPHONE | **8295512640, 9810193462** | EMAIL | **karnalchamunda@gmail.com** |
| COURT SURFACE | **CLAY** | BALLS | **TBA** |
| NO. OF COURTS | **07** | FLOODLIT | **YES – 07** |

**HOTEL DETAILS : FOR ROOM RESERVATIONS AT CHAMUNDA FACILITY MAIL AT** **chamundasports@gmail.com****,**

**Other hotel details as below-**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | **CHAMUNDA PLAYERS RESIDENCY @ Air Conditioned ROOMS & DORMITORIES @ 600/- per person with vegetarian Breakfast, Lunch & Dinner. Without food @ 350/-****On Call Auto service available** | NAME | **Hotel Noormahal** |
| ADDRESS |  | ADDRESS |  |
|  | **Hotel Prem Plaza** |  |  |
|  | **Hotel Leela Grande****Hotel Gopinath Grande** |  |  |
| TARIFF  |  | TARIFF  |  |
| DOUBLE |  | SINGLE |  |

##### RULES / REGULATIONS

|  |  |
| --- | --- |
| ENTRY | **No entry will be accepted through telephone.****Please carry your Original AITA ITN Card for sign in On SIGN IN DAY 12-2 pm** |
| **AGE ELIGIBILITY** | **Players born:**After 1st Jan 2003 are eligible for participation in U/14After 1st Jan 2001 are eligible for participation in U/16  |
| **ENTRY FEE** |

|  |  |  |
| --- | --- | --- |
| **SERIES** | **SINGLES FEE** | **DOUBLES FEE** |
| CS-7 Boys & Girls | **Rs. 500/-** | **Rs 600/- pair** |

 |
| **AITA Registration Card** | **It is mandatory for the player to carry ORIGINAL REGISTRATION CARD for the sign-in. In case the player registration is in process with AITA, the player has to carry Original receipt or copy of mail from AITA confirming that player registration is in process.** |

DRAWS & MATCH SCHEDULE CAN BE SEEN BY 8 PM ON FACEBOOK PAGE -[**WWW.FACEBOOK.COM/CHAMUNDA**](http://WWW.FACEBOOK.COM/CHAMUNDA)**KARNAL**

**TENNIS DEVELOPMENT CHANNEL PARTNERS**

**BSNL, VIRK HOSPITAL & YONEX SUNRISE**