



# ONTARIO HANDBALL ASSOCIATION

## 2014 ONTARIO OPEN Singles CHAMPIONSHIPS

Saturday, May 3rd, 2014  
Cedar Springs Health, Racquet and Sportclub  
Burlington, Ontario

**ENTRY FEES:**

- \$60.00 per player. \$25.00 per junior for junior events.
- Players may enter one event only
- Make cheques payable to Ontario Handball Association and mail entries to:

Ontario Handball Association  
4325 Harvester Road, Unit 12  
Burlington, ONT  
L7L 5M4

*Entries must be received by April 28th 2014*

*Email: [ontariohandball@hotmail.com](mailto:ontariohandball@hotmail.com)*

**AWARDS:** - First and Second in each category

**RULES:** - Current USHA/OHA rules will apply. Eye guards are mandatory. Losers referee next match.

**HOSPITALITY:** - Afternoon lunch and dinner (please let us know if you plan on bringing a guest to dinner, \$20 surcharge will apply)  
- 6 viewing courts, souvenir, prizes, and more!

**BALL:** - Red 21. Novice Divisions- White 21

**DEADLINE:** - April 28th 2014

**START TIMES:** - Call Adam at (289) 237-1821 on Thursday between 6-9pm only. Start times will also be posted on the OHA facebook page.

**PLAY STARTS:** - Saturday 9 am.

**ELEGIBILITY:** - Ontario residents must be O.H.A. members

**NOTE:** Finals may be played on Sunday if time does not allow for a Saturday finish.

**HOTEL INFORMATION** Comfort Inn: 905-639-1700 (Across from Cedar Springs) Quote Cedar Springs when making reservations

**Directions to Club and Comfort Inn**

*Walkers Line cutoff on QEW (exit 105)*

*South Right at Harvester Road, Right at Cumberland Ave.*

**ONTARIO HANDBALL ASSOCIATION**  
**2014 ONTARIO OPEN SINGLES CHAMPIONSHIPS**  
**Event Categories**

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**Events**

Open : \_\_\_\_\_ B : \_\_\_\_\_ C : \_\_\_\_\_ 40 + : \_\_\_\_\_  
50 + : \_\_\_\_\_ 60 + : \_\_\_\_\_ 70 + : \_\_\_\_\_  
Women's Open: \_\_\_\_\_ Junior TBD \_\_\_\_\_

If there are insufficient numbers in divisions, some may be combined.  
Consolation divisions may be combined under the discretion of tournament director.

*In consideration of this entry being accepted, I hereby for myself, waive and release any and all rights and claims for damage I may have against the organization holding this event as well as the facility which is hosting the same.*

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHONE:** H: \_\_\_\_\_ B: \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**PARTNER:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ (parent or guardian if under 18)

***Cedar Springs Health, Racquet and Sportclub***  
***960 Cumberland Ave.***  
***Burlington, Ontario***  
***(905) 632 - 4800***