

MK Georgia Table Tennis 7th Anniversary Grand Team Tournament

Date & Time: Saturday, September 20, 2025 – 10:00 AM

Location: 45 Old Peachtree Road NW #300, Suwanee, GA 30024

MK Georgia Table Tennis Suwanee

Format:

Team Event (2 Singles + 1 Doubles)

Note: The player in Singles Match 1 cannot play in Doubles.

Group stage followed by single elimination final.

Divisions & Prizes

Division	Rating Limit	1st Place	2nd Place	3rd Place
Open	No Limit	\$1,200	\$600	\$300
Division A	Team total rating U4000	Butterfly Bag x3	Dignics x 3	Tenergy x3
Division C	Team total rating U2500	Butterfly Bag x3	Dignics x 3	Tenergy x3

Player Perks:

All players will receive: Kimbap, snacks, water, and a souvenir gift.

Bonus: Lucky Draw Prizes for All Participants!

Registration Info: Registration Deadline: **Aug.31.2025**

• Email: info@mkgtt.com

Entry Fee & Additional Costs

- **Team Entry Fee:**
 - Open Division: \$50 per player × 3 = **\$150**
 - U4000 & U2500 Divisions: \$40 per player × 3 = **\$120**
- **Additional Fees (not included in entry fee):**
 - **USATT Rating Processing Fee:** \$3/player
 - **Non-USATT Members:** Must purchase a Basic Membership (\$25/player)
 - **Late Payment Fee (after deadline):** \$5/player
 - **No refunds after the registration deadline**

Please note that USATT-related fees are charged separately from the team entry fee and no refunds

Tournament Rules & Notes:

1. All matches are best 3 of 5 games.
2. Group stage followed by single elimination.
3. Committee may reassign teams based on skill level.
4. Official Ball: Butterfly R40+ (white, 3-star).
5. Matching uniforms and table tennis shoes are required.
 - No white tops or black-soled shoes.
6. Players arriving more than 5 minutes late will be disqualified. No refunds.
7. Unrated players must book a skill evaluation (Text: 404-399-0941).
8. The tournament format may be adjusted depending on the number of participants.
9. All participants must follow the committee's decisions. Unsportsmanlike behavior may result in disqualification and future bans.

A Special Day of Table Tennis, Fun, and Friendship!



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Registration and Waiver Form (Sep.20.2025 Sat at 10am)

Please Read the Following Statement and Sign your name and date below

1. Assumption of Risk

I understand that participation in table tennis activities involves inherent risks, including but not limited to physical exertion, falls, collisions with equipment or other players, and other risks that could result in injury, disability, or death. I voluntarily assume all risks associated with my participation in this event, whether known or unknown.

2. Release and Waiver of Liability

In consideration of being allowed to participate in this tournament and any related activities, I, for myself and on behalf of my heirs, executors, administrators, assigns, and personal representatives, hereby release, waive, and discharge MK Georgia Table Tennis, its directors, officers, employees, volunteers, contractors, event organizers, sponsors, and agents from any and all claims, demands, actions, or causes of action, arising out of or relating to any loss, damage, or injury (including death) that may be sustained by me or to any property belonging to me, whether caused by the negligence of the released parties or otherwise.

3. Medical Acknowledgment and Emergency Care

I confirm that I am in good physical condition and have no known medical conditions that would prevent me from participating safely in this activity. I accept full responsibility for any medical expenses incurred as a result of my participation. I authorize MK Georgia Table Tennis staff or representatives to seek emergency medical treatment on my behalf if necessary.

4. Media Release

I grant permission to MK Georgia Table Tennis to take and use photographs, video recordings, or audio recordings of me during the event for promotional, educational, or marketing purposes, in print or digital form, without compensation or further approval.

5. Code of Conduct

I agree to conduct myself in a respectful and sportsmanlike manner during the tournament.

I understand that failure to do so may result in disqualification or removal from the event at the discretion of the tournament organizers.

Select the division you want to join.

☐ Division Open

☐ Division A (U4000)

☐ Division C (U2500)

Participant 1

First Name: _____ Last Name: _____ USATT: _____ Rating: _____

Phone: _____ Email: _____

Date of Birth: ____/____/____ (M/D/Y) Gender - Male: _____ Female: _____

P1) Signature _____ Date _____ / Guardian _____ Name _____ (Under 18)

Participant 2

First Name: _____ Last Name: _____ USATT: _____ Rating: _____

Phone: _____ Email: _____

Date of Birth: ____/____/____ (M/D/Y) Gender - Male: _____ Female: _____

P2) Signature _____ Date _____ / Guardian _____ Name _____ (Under 18)

Participant 3

First Name: _____ Last Name: _____ USATT: _____ Rating: _____

Phone: _____ Email: _____

Date of Birth: ____/____/____ (M/D/Y) Gender - Male: _____ Female: _____

P3) Signature _____ Date _____ / Guardian _____ Name _____ (Under 18)