

2013 USTA/ITA DIVISION I REGIONAL CHAMPIONSHIPS

HOST SITE APPLICATION FORM



This completed form (both sides) must be sent to the ITA office along with the signed "Letter of Agreement" no later than **November 23, 2012**.

Please Print Clearly & Complete Both Sides

Name of Tournament Director: _____ Division: _____ M/W: _____ Region: _____

School: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

I would like to host the Division I Regional Championship, presently hosted at: _____

I would like to host a Division I Regional Championship Tournament for (Men, Women or M&W): _____

I would like to schedule this tournament on the following weekend (check all days that apply):

Week 1	Week 2
<input type="checkbox"/> Thursday, October 10	<input type="checkbox"/> Thursday, October 17
<input type="checkbox"/> Friday, October 11	<input type="checkbox"/> Friday, October 18
<input type="checkbox"/> Saturday, October 12	<input type="checkbox"/> Saturday, October 19
<input type="checkbox"/> Sunday, October 13	<input type="checkbox"/> Sunday, October 20
<input type="checkbox"/> Monday, October 14	<input type="checkbox"/> Monday, October 21

ABOUT YOUR ITA TOURNAMENT TENNIS FACILITIES

I plan to host the tournament (check one): Indoors _____ Outdoors _____

of Indoor Courts _____ # of Outdoor Courts _____

Court Configuration _____

Location of Courts (check one): On Campus _____ Off Campus _____

If Off Campus, please specify location & distance from campus:

of Practice Courts _____ Location of Practice Courts _____

of Back-Up Courts _____ Location of Back-Up Courts _____

Court Rental Fees (\$/hr and estimated total cost): _____

Hours Courts are Available During Tournament: _____

If you would like to provide additional information, please include with your other materials and fax back.

Please Copy Page 1&2 & Fax Both to the ITA at 609-497-9586

GENERAL INFORMATION

Anticipated Draw Size: _____

Racquet Stringing Service & Proximity to Courts: _____

Emergency Medical Facilities On/Off Site: _____

Emergency Medical Procedures: _____

Availability of USTA Officials: _____

Spectators Seating: _____

Tournament Hotel/Rate: _____ \$ _____

Area Restaurants (within 5 mile radius of courts): _____

Sports Photographer: _____

Administrative Support (Secretarial/Clerical/Volunteer/Tournament Desk): _____

SPORTS INFORMATION/MEDIA SUPPORT
(Name of College Paper & Sports Editor; Local Papers & Sports Contacts: Clipping Service, etc..)

College Paper: _____ Sports Editor: _____

Local Papers: _____

Sports Contacts: _____

Clipping Service: _____

TOURNAMENT DIRECTOR EXPERIENCE
Please list tournaments directed, number of players, experience with sponsored events (etc..)

1. _____
2. _____
3. _____
4. _____

ADDITIONAL INFORMATION

2013 USTA/ITA DIVISION I REGIONAL CHAMPIONSHIPS • LETTER OF AGREEMENT

I, _____ (your name), agree to serve as the Division I **Men's/Women's** (please circle one) ITA Regional Tournament Director for the event to be hosted at _____ (site name).

I understand the host site responsibilities detailed below and agree to fulfill all of these obligations:

1. To administer the tournament according to the guidelines set forth by the ITA and to meet all deadlines. (The ITA will provide a Tournament Director handbook to the host upon acceptance as host site.)
2. To provide adequate number of tournament courts and practice courts for the participants, to arrange for proper maintenance of courts prior to and during the event, and to make arrangements for suitable back-up courts should conditions warrant.
3. To help conduct the tournament selection, draw, and seeding according to official ITA tournament procedures. (This is the primary responsibility of the Regional Chair and Committee). I understand that the cost of administering the conference call to determine this information is a tournament expense.
4. To help schedule a pre-tournament coaches meeting, in consultation with the Regional Chair.
5. To provide the ITA with a minimum of \$1,000 for the host site fee, payable not later than one week after the conclusion of the final round. The ITA will pay directly for the trophies and event t-shirts for main draw players.
6. To provide the ITA with a copy of the host site's "certificate of (liability) insurance" naming the ITA and USTA as additionally insured. If the host site is unable to provide this, the ITA may be able to help but the host site remains responsible for the cost of this coverage. If the ITA office does not receive a certificate of insurance two weeks prior to the start of your regional championship, the ITA will take out insurance for the event and the host site will be responsible for this expense.
7. To provide the ITA office with all reports, draw sheets, photos, and news clippings by requested due dates.
8. To insure that the tournament is officiated by at least **two** certified USTA officials, according to ITA Rules. There must be 1 official for every 3 courts for qualifying and main draw events. Consolation is strongly recommended to follow this guideline.
9. To provide emergency medical care at the courts by a certified medical trainer, with access to a physician for consultation on serious medical incidents.
10. To offer tournament hospitality (i.e., light refreshments, beverages, etc.) to participating players and coaches.
11. To make available racquet stringing services during the tournament.
12. To implement the online entry registration system as defined by the ITA (if applicable).

Tournament Dates: _____ **Tournament Site:** _____

AGREED TO AND ACCEPTED BY

Tournament Director (Signature)

Institution Rep.(AD) or Executive Management (Signature)

Please Print Name & Title

Please Print Name & Title

Host Institution/Site

Host Institution/Site

Date

Date