

C. O. WILLIAMS BARBADOS SR4 **FACT SHEET**

SR4 16 & UNDER SERIES

2020

Page 1(2)

TOURNAMENT NAME AND DATES

SR4 U16 Tournament	Name of Tournament C. O. Williams Barbados SR4 Easter 2020	City & Country Barbados
Dates	Date of Monday in Tournament Week 6-Apr-20	First day of Main Draw & Consolation Draw 8-Apr-20
		Last day of Tournament 10-Apr-20
Proceeding ITF U18 Tournament	Name of Tournament C. O. Williams Barbados Junior Int'l Tennis Tournament 2020	City & Country Barbados
		Series Type G4

ORGANISER DETAILS

Entry Deadline	Entry Deadline (Date) 19-Mar-20
Entry Organiser	Name of Organiser Barbados Tennis Association
	Street/PO Box address Country code 1
	Area code 246
	Number 427-5300
	Email address tennisbarbados@caribsurf.com
Eligibility	The minimum age required to participate in the SR4 U16 Tournaments is to be 13 years old <u>on the day</u> that the proceeding ITF U18 tournament <u>begins</u>. And the maximum age is to turn 16 during the year of competition.

VENUE

Venue	Name of Club/Venue National Tennis Centre	Contact person Rand St. John (246-253-6417 - mobile)
Address	Garfield Sobers Complex, Wildey, St. Michael	
Surface, Balls	Indoors/Outdoors Outdoors	Type of surface Hard
	Number of courts 4	Brand of Balls Wilson
Telephone, Email	Country code 1	Area code 246
	Number 427-5300	Email-address btafacilitiescoordinator@gmail.com
Fax	Information to be found on tournament web-site:	
Internet address	www.tennisbarbados.org	
	<input checked="" type="checkbox"/> Acceptance lists <input checked="" type="checkbox"/> Draws <input checked="" type="checkbox"/> Order of Play	

TOURNAMENT DIRECTOR & REFEREE

Tournament Director	Name of Tournament Director Marie-Jeanne Symmonds	Post Address
Telephone	Country code 1	National Tennis Centre, Garfield Sobers Complex, Wildey, St. Michael
	Area code 246	
	Number 231-4992	
Email	mjsymmonds@gmail.com	
Referee	Name of Referee Julian Baird	Post Address
Mobile	Country code 1	National Tennis Centre, Garfield Sobers Complex, Wildey, St. Michael
	Area code 246	
	Number 427-5300	
Email	btafacilitiescoordinator@gmail.com	
Series Director	Name of Referee Jermille Danclar	Post Address
Mobile phone	Country code 1	The National Racquet Sports Centre, Tacarigua, Trinidad
	Area code 868	
	Number 729-6861	
Email	subregion4cotecc@gmail.com	

DRAWS AND SIGN-IN DETAILS

Under 16		Draw size	Sign-in deadline	Start day	Prel. finish day	Entry Fee
Boys & Girls	RR & Main Draw	16	8-Apr-2020 8am	8-Apr-2020 9am	10-4-20	USD 160

SUGGESTED HOTELS Rates indicated are for persons not getting free hospitality

Official Hotel 1	Name of Hotel			Street Address		
	Pirates Inn			Browne's Gap, Hastings, Christ Church		
Reserve through (name)	Country code	Area code	Number		Email-address	
	246	426	6273		info@piratesinnbarbados.com	
	USD	Single Room	Double Room / pp	Triple Room / pp	Rate includes:	
	Room Rates	U\$124	U\$124	U\$149	Tax	
Official Hotel 2	Name of Hotel			Street Address		
Reserve through (name)	Country code	Area code	Number		Email-address	
	USD	Single Room	Double Room / pp	Triple Room / pp	Rate includes:	
	Room Rates					

HOSPITALITY	
Hospitality details	Lunch provided at the venue for players on tournament play dates, Airport Pickups to official hotels

TRAVEL AND VISA INFORMATION

	Name of Airport	Distance	Transportation from Airport/Station to Club/Hotel
International Airport	Grantley Adams International Airp	5km	use authorised taxis - BTA can provide transport if request
Domestic Airport			
Bus			
Travel remarks	* Use authorised taxis only - estimated fee U\$20 (airport to tennis\hotel). Rental cars available from TOP CAR RENTALS LTD - Tel: (246) 435 0378; Email: topcar@caribsurf.com		
Visa requirements	Barbados visa information: http://www.foreign.gov.bb/pageselect.cfm?page=84		
	If you require an invitation to obtain a visa, please contact		
Visa Invitations	mjsymmonds@gmail.com		

OTHER INFORMATION

Transport from Wednesday April 8, 2020 to Friday April 10, 2020: 7:30am from official hotel to venue and from venue to hotel at the end of play (if requested and booked in advance, for players entered into the tournament and accompanying coaches only.)

Players are required to attend/participate in daily Educational Forum

Stringing: US\$12

Taxi Services available between tennis venue and hotel Players are responsible for their own hotel bookings

ENTRY FORM



SR4 16 & UNDER SERIES

ENTRY INFORMATION

TOURNAMENT TITLE	City	Country
C. O. Williams Barbados SR4 Easter 2020	Barbados	Barbados
Tournament Dates	Entry Deadline	Withdrawal Deadline
April 8-10, 2020	19-Mar-20	
ELIGIBILIDAD / ELIGIBILITY		
The minimum age required to participate in the SR4 U16 Tournaments is to be 13 years old on the day that the proceeding U18 tournament begins. And the maximum age is to turn 16 during the year of competition.		
Entry Fax Number	Email address	
	subregion4cotecc@gmail.com	

ENTRIES SANCTIONED BY

National Tennis Association	Contact person (name)	Position in National TA
Telephone	Fax	Email

OFFICIAL COACHE ASSIGNED BY NATIONAL ASSOCIATION

Name of Coach

BOYS 16 & UNDER - Entries in priority order -

#	Family Name	PLAYER First Name	Nationality 3-letter code	Date of Birth Date/Month/Year		National ranking 16 & Under
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

GIRLS 16 & UNDER - Entries in priority order -

#	Family Name	PLAYER First Name	Nationality 3-letter code	Date of Birth Date/Month/Year		National ranking 16 & Under
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

DATE AND SIGNATURE

	Sanction date	Signature



WITHDRAWAL INFORMATION

TOURNAMENT TITLE	City	Country
C. O. Williams Barbados SR4 Easter 2020	Barbados	Barbados
Tournament Dates	Entry Deadline	Withdrawal Deadline
April 8-10, 2020	19-Mar-20	
Post Address for entries		
Withdrawal Fax Number	Email address	
	subregion4cotecc@gmail.com	

WITHDRAWALS MADE BY

National Tennis Association	Contact person (name)	Position in National TA
Telephone	Fax	Email

BOYS 16 & UNDER - Withdrawals

#	Family Name	PLAYER			Medical / / Other reason	Certificate Attached / / To follow
		First Name	Nationality 3-letter code	Date of Birth Date/Month/Year		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

GIRLS 16 & UNDER - Withdrawals

#	Family Name	PLAYER			Medical / / Other reason	Certificate Attached / / To follow
		First Name	Nationality 3-letter code	Date of Birth Date/Month/Year		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

DATE AND SIGNATURE

Date	Signature