



# 2025 Kalahari Resort Nationals

## 8 BALL SCOTCH DOUBLES

### REGISTRATION FORM

**PLAYERS / LICENSEES:** Please complete this form and submit with the payment to be received by Sept. 29th  
No Entries will be accepted after this date/midnight. Fee is \$250 per TEAM.  
All Checks should be submitted, with this form made payable to:  
**TAP, LLC and sent to P.O. Box 5 ROUND HILL, VA 20142.** NO FAXED REGISTRATIONS OR EMAILS PLEASE.  
Email [nationalchanges@tapleague.com](mailto:nationalchanges@tapleague.com) with any questions.

**PLAYERS MUST HAVE A CURRENT TAP MEMBERSHIP ON TAP THE PHONE APP, OR THEY WILL NOT BE ALLOWED TO PLAY. ID WILL BE VERIFIED BY THE OPPONENTS IN YOUR EVENT.**

Players must have a minimum of 6 matches, and 10 lifetime matches played together **in weekly play** and /or tournaments held by licensees and score sheets through Pool Net from May 12th to Sept. 29th. Scotch Doubles Event is Round Robin To Single Elimination. HCs divided by 2/3/4 & 5/6/7 Race per 8 Ball Grid.  
NO REFUNDS, No Exception – Only Limited to 32 Teams.  
**SCOTCH DOUBLES 2/3/4 & 5/6/7 STARTS MONDAY, OCT 27<sup>TH</sup> @ 2PM**  
**SINGLE ELIMINATION 6PM-CONTINUOUS PLAY**

LICENSEE / OPERATOR NAME:	Brandi Balza & Nick Petronio	LICENSEE ID #	228
LICENSEE TERRITORY/ LEAGUE NAME:	Three Rivers TAP	STATE/PROV.	PA

PLAYER 1 NAME & ID #:
PLAYER 2 NAME & ID #:
PLAYER EMAIL:
PLAYER PHONE:

#### 8-BALL SCOTCH DOUBLES ALL HANDICAPS IN ONE BRACKET ( PLEASE CIRCLE YOUR COMBINED CAP)

FEE	HANDICAP 2	HANDICAP 3	HANDICAP 4	HANDICAP 5	HANDICAP 6	HANDICAP 7
\$250.00						

PLAYER ID NUMBER:	HANDICAP LEVEL:
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**ARE YOU IN THE TEAM EVENT ALSO? IF YES IS IT ONE TEAM OR TWO (PLEASE CIRCLE)**

ONE TEAM

TWO TEAMS

**TEAM NAMES :**

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