



ITF BEACH TENNIS TOUR

Beach Tennis Tour

TOURNAMENT FACT SHEET

Page 1(2)

| TOURNAMENT NAME AND DATES | | | | |
|---------------------------|--|---|---|---------------------------------------|
| Tournament | Promotional name of Tournament Etapa Internacional ITF São Miguel do Gostoso | | Country Brasil | Tournament Category \$2,500 |
| Dates (dd/mm/yyyy) | First day of Qualifying 30/06/17 | First day of Main Draw 01/07/17 | Last day of Tournament 02/07/17 | Hospitality Provided No |

| NATIONAL ASSOCIATION CONTACT | | | | |
|------------------------------|---|--|--|------------|
| National Association | Name of National Association (will auto-complete when Host Nation is selected) Confederacao Brasileira de Tenis | | Host Nation (select from list) Brazil | |
| NA Contact | Name of Contact Edwin Suikerbuik | | Post Address | |
| Telephone / Fax | Country Code 55 | Telephone Number 84999851970 | Country Code | Fax Number |
| Email & Website | Email address beachtennis@cbtenis.com.br | | Website address www.cbtenis.com.br | |

| ENTRIES AND WITHDRAWALS | | | | |
|-------------------------|---|---|--|--|
| Deadlines | Entry deadline 08 June 2017 | Deadline time (GMT time) 14.00 | Withdrawal deadline 13 June 2017 | Deadline time (GMT time) 14.00 |
| Entries | <input type="checkbox"/> Accepted? Post | Name of Tournament Organiser | | Street/PO Box address |
| | <input type="checkbox"/> Accepted? Fax | Country code | Telephone Number | Fax Number |
| | <input checked="" type="checkbox"/> Accepted? Email | Email address beachtennis@cbtenis.com.br | | |
| | | Website address where Entry and Acceptance Lists will be published www.tenisintegrado.com.br | | Entry lists published from 22/5/17 |

It is the player's responsibility to ensure Entries and Withdrawals are received before the deadline

Entries/Withdrawals must be submitted on the official Form provided on the ITF website

| TOURNAMENT VENUE | | | | |
|----------------------------|--|--|--|------------|
| Venue | Name of Club/Venue Praia de Santo Cristo | | Contact person Edwin Suikerbuik | |
| Location | Venue Location e.g. public/private beach, lake, town centre Public Beach | | | |
| Address | Venue Address | | | |
| Telephone / Fax | Country Code +55 | Telephone Number 84999851970 | Country Code | Fax Number |
| Email & Website | Email address beachtennis@cbtenis.com.br | | Website address www.tenisintegrado.com.br | |

| TOURNAMENT OFFICIALS | | | | |
|-------------------------------------|--|--|--|---|
| Tournament Director | Name of Tournament Director Edwin Suikerbuik | | Post Address | |
| Telephone / Fax Before Event | Country code 55 | Telephone Number 84999851970 | Country code | Fax Number |
| Telephone / Fax During Event | Country code 55 | Telephone Number 84999851970 | Country code | Fax Number |
| Email & Website | Email address beachtennis@cbtenis.com.br | | Website address www.tenisintegrado.com.br | |
| Referee | Name of Referee Jeferson Pinto | | Country Brazil | National Certification/ITF Certification National Certification/ITF Certification |
| Mobile / Email | Country code 55 | Mobile Number 3199569765 | Email address jefersonpintortm@yahoo.com.br | |
| Telephone / Fax Before Event | Country code 55 | Telephone Number 3199569765 | Country code | Fax Number |
| Telephone / Fax During Event | Country code 55 | Telephone Number 3199569765 | Country code | Fax Number |

| | |
|--|----------------------------------|
| Sports Medicine Trainer On-site | Full Name Jordi Moraes |
|--|----------------------------------|

| DRAWNS AND SIGN-INS | | | | | | |
|---------------------|--------------------|-----------|--------------------------------------|----------|------------|------------|
| | | Draw size | Sign-in deadline (Date & Local Time) | | Start day | Finish day |
| | | | Date | Time | | |
| Men | Doubles Qualifying | 8 | 29/06/2017 | at 18.00 | 30/06/2017 | 30/06/2017 |
| | Doubles Main Draw | 24 | 30/06/2017 | at 18.00 | 01/07/2017 | 02/07/2017 |
| Women | Doubles Qualifying | 8 | 29/06/2017 | at 18.00 | 30/06/2017 | 30/06/2017 |
| | Doubles Main Draw | 24 | 30/06/2017 | at 18.00 | 01/07/2017 | 02/07/2017 |
| Mixed Doubles | Doubles Qualifying | | | at | | |
| | Doubles Main Draw | 16 | 29/06/2017 | at 18.00 | 30 June | 30 June |

| JUNIORS DRAWNS AND SIGN-INS | | | | | | |
|--|----------|----------|----------|--------------------------------------|-----------|------------|
| | 18&Under | 16&Under | 14&Under | Sign-in deadline (Date & Local Time) | Start day | Finish day |
| Boys | | | | | | |
| Girls | | | | | | |
| Juniors Additional Info: (i.e. entry process) | | | | | | |

| GENERAL INFORMATION | | | | | |
|---|---|------------------|---------------------------|----------------------------|---------------------|
| Courts / Balls | Total Courts | Indoor / Outdoor | Court dimensions (metres) | Height of the Net (metres) | Official Ball |
| | 14 | Outdoor | 16 x 8 metres | 1.7 metres | Quicksand |
| Prize money & Entry Fee Currency | Tax Deductions % (Resident. / Non-resident) | | | | Entry Fee per pair* |
| BRL | No | | | | USD 50,00 |
| *Maximum: \$50 per team for events up to \$2,500 prize money; \$70 per team for events of \$6,500 and \$10,000; \$150 per team for events offering over \$10,000 prize money and World Championships. An extra \$20 is allowed for indoor events. | | | | | |
| Hospitality | Additional Information about Hospitality provided | | | | |
| Social Events | Activity, Day/Time Free Beach Tennis Class for social project for children from the local town | | | | |

| HOTELS | | | | | | | Rates indicated are for persons who do not receive free hospitality | | |
|-------------------|---|---------------------------------|-----------------------|---|---|---|---|--|--|
| Official Hotel 1 | Name of Hotel Albergue da Jangada | | | | Street Address | | | | |
| Telephone / Email | Country code 55 | Area code 84 | Number 991027886 | | Email Address contato@alberguedajangada.com | | | | |
| Fax / Transport | Country code | Area code | Number | | Transport to Venue | | | | |
| Reservations | Contact person for reservations Remi | | Deadline | | Direct telephone number | | | | |
| Room Rates | Single 50 BRL | Double / pp 75 BRL | Triple / pp | Tax Included <input type="checkbox"/> Yes | Breakfast Incl.? <input checked="" type="checkbox"/> Yes | Additional information (breakfast price, tax applied) | | | |
| Official Hotel 2 | Name of Hotel Pousada Ilha do Vento | | | | Street Address | | | | |
| Telephone / Email | Country code 55 | Telephone Number 84994289909 | | Email address ilhadovento@gmail.com | | | | | |
| Fax / Transport | Country code | Area code | Number | | Transport to Venue | | | | |
| Reservations | Contact person for reservations | | Deadline | | Direct telephone number | | | | |
| Room Rates | Single | Double / pp 85 BRL | Triple / pp 85 BRL | Tax Included <input type="checkbox"/> Yes | Breakfast Incl.? <input checked="" type="checkbox"/> Yes | Additional information (breakfast price, tax applied) | | | |

| TRAVEL AND VISA INFORMATION | | | |
|-------------------------------|---------------------------------------|----------------------------------|---|
| Nearest Airport | Name of Airport / Station Natal RN | Distance to Hotel/Site 100 km | Transportation from Airport/Station to Hotel/Site Free Transportation with organiser |
| Nearest Train Station | | | |
| Road Directions to Hotel/Site | | | |
| Additional Information | | | |
| Visa requirements | Details | | For Visa Invitations, please contact: |

| OTHER INFORMATION | |
|--|--|
| For mixed doubles will be charged 15,00 USD per person | |
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