

6th Annual Crusty's Revenge Cribbage Tournament



Date: Saturday June 3 2017

Place: North Conway Grand Hotel, Rt 15 at Settlers Green, North Conway, NH 03860 Phone: 603.356.9300. northconwaygrand.com Use keyword Cribbage when making reservation via phone or net. 3 night stay required to get the incredible rate of 109.00 per night.

Tournament Director: Lana Newhouse

lmnewhouse@twc.com

Co-Director Mark and Vicki Soule 207.442.9001

Soule1994@comcast.net

David Campbell 207.730.2051

acccribbage@aol.com

Friday evening June 2 Welcome Singles Match 9 games vs 9 Opponents. Please pay at the door.
\$30.00 Entry Fee 7:30 PM 1 in 5 will be paid

Main tournament

Consolation tournament

Entry Fee: \$70.00 (includes \$3.00 ACC fee)

\$30.00 (includes \$1.00 ACC fee)

(Lunch is included)

Q-Pool: \$15.00 (optional, shared equally)

\$10.00

Registration: Begins at 7:30 AM

Begins at Aprox 1:00 PM

Orientation: 8:20 – 8:30 AM

Aprox 1:45 PM

Start time: 8:30 AM SHARP

Aprox 2:00 PM (After 1st rd completion)

Format: 14 games – 1 game vs. 14 different opponents with alternate deals

9 games – 1 game vs. 9 different opponents with alternate deals

Playoffs: Top 25% will play best 3 out of 5
Final Four will play best 3 out of 5

Top 25% play best 2 out of 3 throughout

- Muggins will NOT be in effect for either the Main or Consolation tournaments
- Players **MUST** be able to play a game of cribbage in 15 minutes
- Deadline for RECEIVING entries is May 29, 2017 – Because we need counts for meals you **must** call and “pay at the door” if later than this date.

There will also be a one day tourney on Sunday June 4, 2017 and a midweek tournament on Thursday and Friday. Also we will be holding a Canadian Doubles tourney Saturday evening.

Crusty's Revenge Cribbage Tournament

Name _____ ACC # _____

Address _____ City _____ ST _____ Zip _____

Phone _____ Email _____

Total Enclosed: \$ _____ Stationary seating required? _____

I understand that New Hampshire law prohibits gambling, I am at least 21 years of age and I agree to abide by the rules and regulations of the American Cribbage Congress.

SIGN HERE: _____ **DATE:** _____

Mail this form and entry fee to: David Campbell
1321 North Rd.
Parsonsfield, ME 04047