

★ CALL OF DUTY 4 TOURNAMENT REGISTRATION FORM ★



Main St. Armory (Across from Aud. Theatre), 900 East Main Street Rochester, NY
April 11, 12 & 13, 2008, Friday 5 pm - 9 pm, Saturday 10 am - 6 pm, Sunday 10 am - 4 pm

PRIZES:

Each person from a two person team will receive:
- 94 The Zone T-shirt
- Free Jolt soda
Winning team(s) will win concert tickets, cash.

RULES:

FIRST AND FOREMOST TO ENTER PLEASE PUT YOUR TEAM NAME AND THE LEADER. THANKS!
1. Each team has the ability to choose their teammates. If you sign up for the tournament without teammates, you will be randomly chosen for a team.
2. Each team MUST consist of two people only.
3. Each team must select a team leader. The team leader may dispute calls, and aspects of a round that they feel was unfair in which case the judges will decide.
4. One team gets to choose the map. Then the next round vice versa. Whomever wins the second round, if a third round is still necessary, the team that lost round two gets to choose map.
6. If at the end of a round, it is tied, then it goes into overtime until another team wins.

Summary

- Format: 2v2
- Gametype: Search and Destroy
- Round Time: 2-3 min depending on tourney size
- Strategy Time: 5-10 sec. depending on tourney size
- Score Conditions: First to 4 points
- Spectator Mode: Team Only
- Friendly fire: ON
- Multibomb: Disabled
- Kill Cam: Off
- Maps: District, Crash, Backlot, Crossfire, Vacant, Strike

Tournament Structure

Group stage through to single elimination. Please note that this could be changed to double elimination depending on the amount of teams. Any change will be determined before tournament start. Tournament will start at 12:00 noon Sat April 12. Final rounds will be on Sunday April 13 at noon.

Name _____ Team Name: _____

Address _____

Telephone _____ Email _____

Player 1 name: _____

Player 2 Name: _____

PAYMENT METHOD: cost for event is \$20 per team and includes admission into Game Room Show

- Check or money order payable to American Sports Media
 Credit Card VISA MasterCard Discover American Express

Card # _____ Exp. Date _____

I agree to the stated terms:

Signed _____ Date _____

Send payment to: American Sports Media COD4 • 3495 Winton Place • Rochester, NY 14623
Email: info@rochestergameroomshow.com • Fax: 292-0035