WEST COAST DISTRICT TOURNAMENT REPORT FORM

TO BE COMPLETED BY THE TOURNAMENT DIRECTOR

When there is more than one tournament division, submit a separate form for each division.

Tournament Number: ARO8 Tournament Date 11/5-6/2026 Host Club: St Pete

Tournament Name: Amateur Singles

Sponsors: Humana

Tournament Directors: Martin Shapiro, Betty Baber

Entries in this Division: Number of Teams: _____ Number of Players: 12

Place an X in the appropriate boxes below.

Format:	☐ DOUBLES	☒ SINGLES	☐ DRAW	☐ MINGLES
Skill Level:	☐ OPEN	☐ PRO	☒ AMATEUR	☐ NO2PROS
Gender:	☒ ANY	☐ MEN	☐ LADIES	☐ MIXED

**********MAIN EVENT WINNERS**********

1. Name: Patrick Fruin FSA 8243 Club: St Pete
   Name: _____ FSA #: _____ Club: _____
2. Name: Ken Buckwalter FSA # 8194 Club: St Pete
   Name: _____ FSA #: _____ Club: _____
3. Name: Terri McGough FSA # 7854 Club: St Pete
   Name: _____ FSA #: _____ Club: _____
4. Name: Gary Alexander FSA # 8394 Club: St Pete
   Name: _____ FSA #: _____ Club: _____

**********CONSOLATION WINNERS**********

1. Name: Shaun Saltzberg FSA # 8328 Club: St Pete
   Name: _____ FSA #: _____ Club: _____
2. Name: Dick Keener FSA # 8393 Club: St Pete
   Name: _____ FSA #: _____ Club: _____
3. Name: Thom Robertson FSA # 7536 Club: Pinellas Park
   Name: _____ FSA #: _____ Club: _____
4. Name: Maurice McGough FSA # 7575 Club: St Pete
   Name: _____ FSA #: _____ Club: _____

If you mail this report, please post it at the Main Post Office immediately after the tournament. Enter "Winners" names & FSA #'s exactly as shown on their registration forms. Players must always use the same exact name when they register for any tournament. PLEASE DOUBLE CHECK THE SPELLING OF WINNERS' NAMES.

Send or give one copy of this form to:

Martin Shapiro, WCD Keeper of Records
91 Cypress Drive
Safety Harbor, FL 34695
email: KOR@westcoastfsa.com