

# RIVER CITY BILLIARDS ASSOCIATION SUMMER 2025

WEEKLY DIVISIONS 100% PAYBACK TO PLAYERS

**DEADLINE IS 4/30/25**

## SUNDAY

**STARTING** 6-1-2025

\_\_\_ 4:00 PM 8 – BALL OPEN (5 PER TEAM) SANCTION \$80 (\$15 VNEA, \$20 BCA, \$15 ACS, \$10 IOMA, \$15 ISPA, \$5 MIDWEST) IA LOCATIONS ONLY

\_\_\_ 7:30 PM 8 – BALL OPEN (5 PER TEAM) SANCTION \$80 (\$15 VNEA, \$20 BCA, \$15 ACS, \$10 IOMA, \$10 ISPA, \$5 MIDWEST) IA LOCATIONS ONLY

## MONDAY

\_\_\_ 7:30 PM 8 – BALL OPEN (5 PER TEAM) SANCTION \$80 (\$15 VNEA, \$20 BCA, \$15 ACS, \$10 IOMA, \$10 ISPA, \$5 MIDWEST) IA LOCATIONS ONLY

## TUESDAY

\_\_\_ 7:30 PM 8 - BALL SHORT SESSION (4 PERSON TEAM 1 'A' PLAYER PER NIGHT) NO SANCTION FEES

## WEDNESDAY

\_\_\_ 7:30 PM 8 - BALL OPEN (4 PER TEAM) SANCTION \$40 ( \$15 ACS, \$10 IOMA, \$15 ISPA) IA LOCATION ONLY

\_\_\_ 7:30 PM 9 - BALL LEAGUE (3 PER TEAM) NO SANCTION

## THURSDAYS

\_\_\_ 7:30 PM 8 - BALL OPEN (5 PER TEAM) SANCTION \$80 (\$15 VNEA, \$20 BCA, \$15 ACS, \$10 IOMA, \$15 ISPA, \$5 MIDWEST) IA LOCATIONS ONLY

\_\_\_ SINGLES LEAGUE Played anytime over the course of a week at any NTS Location. NO HANDICAP 8ball RACE TO 7. Split quarters, Winner Breaks. 12 players minimum. \$5 wkly dues. Payout top 3 @ 12 players. 10 points for Match win. Additional 4 points for each game won. 1 point for game lost. MOST MATCH WIN/LOSS determines placing. Points will be tiebreaker. If still tied, head to head result will break tie.

**\*\*\*THERE MUST BE MINIMUM OF 5 TEAMS TO HAVE A DIVISION OR TEAMS MUST**

**CHANGE NIGHTS. PLEASE PRINT LEGIBLY & COMPLETE IN ALL AREAS OR "IT WILL NOT**

**BE ACCEPTED"**

BAR LOCATION NAME \_\_\_\_\_ EMAIL (MANDATORY) \_\_\_\_\_

BAR ADDRESS, ZIP & PHONE # (MANDATORY) \_\_\_\_\_

TEAM NAME \_\_\_\_\_

CAPTAIN - PLAYER 1 NAME: \_\_\_\_\_ EMAIL (MANDATORY) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

PLAYER 2 NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: \_\_\_\_\_

PLAYER 3 NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: \_\_\_\_\_

PLAYER 4 NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: \_\_\_\_\_

PLAYER 5 NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: \_\_\_\_\_

**THE CAPTAIN IS RESPONSIBLE FOR COLLECTING SANCTION FEES, SPONSOR FEES, AND WEEKLY FEES. FORM NEEDS TO BE FAXED OR RETURNED TO OFFICE BY 4/30/25. ONE TEAM PER ENTRY FORM. IF THERE ARE ANY QUESTIONS PLEASE**

CALL Brian @ 402-592-1555. NTS 7812 ½ F ST OMAHA, NE 68127 FAX 331-7603 [www.ntsfuncompany.com](http://www.ntsfuncompany.com)