

John Medeiros Memorial Tournament

October 22-24, 2021



Director: Jennifer Johnson | 617-515-2232 | Jennifer.ACC.TD@gmail.com
 Co-Director: Megan Player

On September 23, 2020, John lost his battle with COPD. A small fund has been established to hold this tournament in his memory. This fund will pay all tournament expenses and sanctioning fees.

FRIDAY NIGHT EARLY BIRD

Register: 6:30 pm / Play: 7:00 pm
 Fee: \$30
 9 games / 9 opponents
 Pays 1 in 4

Payback 100%

SATURDAY NIGHT CANADIAN DOUBLES

Register: 6:30 pm / Play: 7:00 pm
 Fee: \$50/team
 9 games / 9 opponents
 Pays 1 in 4

Payback 100%

SATURDAY MAIN

Register: 8:00 am / Play: 8:30 am
 Fee: \$80 (\$20 Optional/Equal Q)
 22 games / 22 opponents
 Top 25% to playoffs

Payback 100%

SUNDAY CONSY

Register: 8:30 am / Play: 9:15 am
 Fee: \$40 (\$10 Optional/Equal Q)
 9 games / 9 opponents
 Top 25% to Playoffs

Payback 100%

PLAYOFFS

7:45 am Sunday / Best 3 of 5

PLAYOFFS

1pm best 2 of 3

Muggins in effect ALL weekend
 MRPs for ACC members

Trophies Awarded
 Walk-ins Welcome!
(cash only, no lunch)

Comfort Suites Raleigh Durham Airport/RTP

5219 Page Road Durham, NC 27703

(919) 314-1200 or book online at
<https://bit.ly/JohnMed2021>

Cribbage Rate
 \$99/night plus tax (through Oct. 8, 2021)

Mention code "Cribbage"
 or Group Number LN66K3

Double-Queen and King Rooms available

Sanctioned By



AMERICAN
CRIBBAGE
CONGRESS

2021 John Medeiros Memorial Registration

Room size dictates a maximum of 84 entrants

Judge

Anchor Seat

Name(s) _____

ACC Number(s) _____

Address _____

City _____

State _____

ZIP _____

Email _____

Phone _____

Registration For:

Main (\$80)

Optional Q (\$20)

Friday Night Early Bird (\$30)

Saturday Night Doubles (\$50)

Check payable to:

Jennifer Johnson
1006 Delaronde Lane
Morrisville, NC 27560

Boxed lunches will be provided by the tournament on Saturday. Make your selection below. Entries must be postmarked by October 8th for lunch.

Ham

Roast Beef

Turkey

No Thanks

Partner: _____

Arriving RDU

If you need transportation to and/or from RDU Airport, please help us help the hotel shuttle.

Airline _____

Flight # _____

Arr.Time _____

Departing RDU

Airline _____

Flight # _____

Dep.Time _____

I agree to abide by the rules of the American Cribbage Congress and this Tournament. I will not hold the ACC, tournament directors, or Comfort Suites liable should my health be possibly compromised by attending the tournament.

Signature _____