



Do you have what it takes to triumph at a no-holds-barred poker game? Step up to the table and try your luck at the most popular game in casinos nationwide!

This tournament will feature 10 tables running simultaneously. Each player will be provided with “money” to play for approximately one hour. At the end of this hour of play, the player with the most money at each table will advance to the finals. The deciding round will last no more than 30 minutes and the winner will receive a prize, along with bragging rights.

### **Registration**

Participants of the tournament must be registered as a conference attendee (member, nonmember, guest, exhibitor, Business Partner, retiree).

You can register for the tournament when you register for the conference using the on-line registration feature or paper registration form. If you sign up for the tournament after you have registered for the conference, you must register using the paper registration form. All players must complete a registration form.

If you must cancel, refunds will be made only if notification is sent in writing to the NACAS office on or before September 23, 2011. Refunds are processed after the conference. No refunds will be given for cancellations after September 23, 2011.

This is a non-gambling event with no cash to be awarded. Prize values may be based on MSRP and may include pre-paid cards good for goods and services only.

Participation is limited to the first 60 players.

**Keep your cards close to the vest and see if you have what it takes to be declared the champion!**





**Tuesday, October 25, 2011**  
**Registration: 4:45 p.m. (Everyone must check in on site)**  
**Tournament: 5 - 7 p.m.**

NAME (LAST, FIRST) \_\_\_\_\_ NICKNAME \_\_\_\_\_

TITLE \_\_\_\_\_

INSTITUTION/COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST/PROV \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

PREFERRED TABLE PLAYERS - (List up to three preferred table players.) Please ensure the players you list are registering & attending the conference before submitting the form.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



By Sept. 23

**Registration**

**\$99**

Return form to:

NACAS Conference Registrar  
 PO Box 5546  
 Charlottesville, VA 22905-5546

Fax: 434.245.8453  
 email: info@nacas.org  
 Phone: 434-245-8425

Or register online at [www.nacas.org](http://www.nacas.org)

NACAS Federal ID #: 16 0999 454

Credit Card	<input type="checkbox"/>	Visa	<input type="checkbox"/>	MasterCard	<input type="checkbox"/>	AMEX		Amount \$ _____
Card#	_____						Expires	_____
Name on Card	_____							
Signature	_____							
Check	<input type="checkbox"/>	Enclosed	<input type="checkbox"/>	To Follow	<input type="checkbox"/>			Amount \$ _____
Registration Application Date	_____						TOTAL DUE \$	_____