

Revised 4/12/13

From: SCW Pickleball Club Board

To: Members of the SCW Pickleball Club  
Coordinators of SCW Pickleball Club – Reciprocal Play Groups / Teams

**Subject: SCW Pickleball Club Reciprocal Play**

Included in this Document:

- 1) Reciprocal Play SCW Pickleball Club Overview
- 2) SCW Pickleball Club Reciprocal Play Forms and Procedures
  - a. Form to start a group or team: (see attachment SCW PB RTEAM Form & Instr)
  - b. The Coordinator Pledge: (see attachment SCW PB RTEAM Pledge)
  - c. Team Enrollment Announcement: (see attachment SCW PB RTEAM Enroll Ann)
  - d. Team Roster Status Reporting: (see attachment SCW PB RTEAM Roster Status)
  - e. Team Activity Reporting: (see attachment SCW PB RTEAM Act Report)

Date: 4/12/13

To: Membership SCW Pickleball Club  
From: SCW Pickleball Club Board of Directors

Subject: Reciprocal Play SCW Pickleball Club – Overview of Program

Reciprocal play is often a misunderstood program. This document has been written to insure that our club members have a good understanding of what reciprocal play is and how they may choose to participate if they are interested.

It will include:

- 1) A general overview of what reciprocal play is and is not
  - a. Included references to SCW Charter Club RRP's on reciprocal play & necessary forms
- 2) How reciprocal play will work for the SCW Pickleball Club
- 3) The process and forms that each SCW Pickleball Club Team Coordinator will need to complete and maintain.

## 1) What is Reciprocal Play?

Reciprocal play allows Members of SCW Charter Clubs, with like interests, to form teams, leagues, groups, etc. and compete and/or socialize with other club members of like interests, from other age restricted communities. SCW has RRP's that state the rules that need to be followed and forms that need to be filled out. Each Charter Club that would like to participate may also have their own guidelines or rules for Club Member participation. SCW requires each Charter Club to approve the use of reciprocal play for their own club on an annual basis during a scheduled membership meeting.

SCW Charter Club "Rules, Regulations and Procedures" for reciprocal play may be found on the www at: <http://scwclubs.com/rfps/>

Key summarized points include:

*It is the Association's policy that only members of the Association (Owner Members, Associate Members,, and persons with Tenant Activity Cards) may be members of Chartered Clubs and, therefore, members of Chartered Club teams.*

*Both sport and non-sport Chartered Clubs may wish to reciprocate with established clubs in other age restricted communities for the purpose of competing or sharing social and common interests.*

*Age restricted community clubs/teams shall not be allowed to compete/meet with a SCW Chartered club/team using Association facilities **unless the following conditions are met:***

*1. Advanced approval shall be required from the SCW Recreation Activities Manager who shall assist the club/team in developing a CR-14a. Also found on the www at: <http://scwclubs.com/rfps/>*

Note – The SCW Pickleball Club will have a form for each group to use when forming. The Club Board will be responsible for completing the necessary CR 14a required by the SCW Recreation Activities Manager. Details of this Club process and the Club form is attached.

*2. The CR-14a establishes the parameters wherein SCW and the participating age restricted*

communities will make every reasonable effort to schedule play or visits, with a comparable number of times on similar facilities without being required to pay any fee.

3. The Chartered Club's membership **MUST** annually approve at a regularly scheduled meeting of the members and their president or designated representative submit a CR-14a that specifies club/team reciprocal events including:

- Projected activities
- Participant qualifications (if applicable)
- Proposed event schedule
- Attach the schedule

In summary, reciprocal play is the sharing of community space/resources between eligible communities, eligible teams and eligible participants. Reciprocal play in SCW is offered to Charter Clubs as long as they follow the rules set forth by each of the different communities involved and the respective clubs involved. It may involve sporting clubs like softball, tennis, pickleball, etc. but it could also involve social clubs like dance, bridge, quilting, etc. Common interest teams or groups may form for competitive play or social interests or a combination of both.

Please remember that all Club members have the equal opportunity to form a like interest group, but it also takes another like interest team or group from other communities in order for reciprocal play to work. We have listed a few examples of possible pickleball teams or groups that could be formed. Please keep in mind that the list of possible teams could include a wide variety of people and interests.

- Skill based teams for competition:
  - examples: men's 3.0, ladies 5.0, beginners, mixed, etc.
- Age based teams for competition or social interests
  - examples: men 70 and older, women 55 – 60, couples age ?, etc.
- Social interests teams or groups
  - examples: 1 hr play & out to dinner group, no score just exercise group, recreational only group, etc.

**IMPORTANT: Reciprocal Play is not one couple from SCW getting together with one couple from Sun City to play Pickleball to avoid paying guest fees!**

## 2) How Reciprocal Play Will Work for the SCW Pickleball Club

### IMPORTANT THINGS TO KEEP IN MIND

- Even though many different potential groups could form it may not be practical for that particular group to use reciprocal play successfully, since it also requires a similar interest group from other eligible communities and the coordination of activities between communities.
- Reciprocal play **will never interfere** with any SCW Pickleball Club Scheduled Activity. This is because Reciprocal Play is controlled and managed by the Club and may only use court space and court time that is approved & allocated for their use. Allocated court space and court time will only be provided if the Club does not have a need for it. And if the Club does have a future need, reciprocal play will have to change, be cancelled or modified to fit the needs of the Club.
- Fair use of resources between communities needs to exist. Example: Assuming a team or group from each of four communities, wants to play once a week, this means that each

community involved will travel to the host community for that play session. Each community involved needs to allocate their fair share of court space and time to do their part during the weekly rotation of play. In this example SCW Pickleball would allocate court space and time to host the four communities involved, once every four weeks.

- Each reciprocal play team or group will have to have coordinators to organize the play when they are the host community and insure all is ready for team play. The SCW coordinator(s) will also have to report to the SCW PB Club Board / Liaison and SCW Rec Management keeping track of information required of all who participate.
- How you can participate in reciprocal play? There are two ways:
  - 1<sup>st</sup> if a team or group is already formed and you fit the criteria or like interest of the group, you are eligible to sign up for participation.
  - 2<sup>nd</sup> if you do not fit the criteria or like interest of a team or group that is currently formed, you are welcome to form a new group that fits your criteria or like interest, and seek out other eligible communities to form the same.

Example: you are a 65-year-old male and want to play with other 65 and older players: If a Men's 65 and older group is already formed and playing, you would be eligible to enroll and participate. However, if a group like this is not formed, you would be welcome to form a new group.

Note: Common sense needs to apply. If a social group is formed with the primary criteria as "getting some light exercise and enjoyment for beginners" a person seeking competitive play with higher skills would not fit into this group and does not belong, nor should be allowed to participate.

- If I am eligible and signed up for a reciprocal play team, how do I know when I get to play?
  - Once a team is formed and has been approved to start each involved community will allocate time and court space, based upon what is available, for the team to play.
  - Since times may be different from community to community, it will be important for a calendar with play times to be communicated to all participants. This is the job of the coordinators. Since our lives are busy we may not be able to make each play date or time. It will be **important to have a fair access, sign up system** to notify all eligible participants and to have subs and waiting lists established to fill empty slots as needed. If a person has to go on the waiting list, because court allocation is full, there needs to be a way to allow a rotation in for future play to the wait-listed person(s).
- Who will make sure that favoritism does not take place and the system is fair.
  - Reciprocal play is based upon the fair sharing of resources and must provide for fair access and play. If something would occur that does not promote fairness the SCW Rec Administration and/or the SCW Pickleball Club Board will step in to correct this.  
*Note: In the following section, the SCW Pickleball Board has set forth specific procedures and reports that each Reciprocal Play Coordinator must complete and maintain. These procedures and reports are in place to support the objective of; fairness of resources, access and play.*

As reciprocal play hopefully grows for the members of the SCW Pickleball Club, the above informational areas may be amended and added to.

**3) The process and forms that each SCW Pickleball Club Team Coordinator will need to complete and maintain.**

- Form to start a group or team: (see attachment SCW PB RTEAM Form & Instr)
- The Coordinator Pledge (see attachment SCW PB RTEAM Pledge)
- Team Enrollment Announcement: (see attachment SCW PB RTEAM Enroll Ann)
- Team Roster Status Reporting: (see attachment SCW PB RTEAM Roster Status)
- Team Activity Reporting: (see attachment SCW PB RTEAM Act Report)

Please note: the intention of the above procedures is to keep reciprocal play; fair, open to all interested, and all groups operating under the same guidelines.

If anyone has a question about SCW Pickleball Reciprocal Play, please feel welcome to contact the SCW Pickleball Club Board and let us know how we may support your reciprocal play needs or questions.

**SCW Pickleball Board of Directors**

## SCW Pickleball Club Reciprocal Play: Team Formation & Instructions

<b>Team/Group Name:</b> What will you be called?	<b>Date:</b> _____
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**Team/Group Coordinator:** Contact Person Name, Phone #, Email

**Reciprocal Communities:** Please List Contact Information: (Community, Name & Phone #)

  
  

**Primary Focus of Play:**      **Competitive**     or      **Social**

**Enrollment Criteria or Requirements:** if any (see instructions for skill or age, etc.)

  
  

**Requested Calendar of Events for SCW:**

**Start Date:** \_\_\_\_\_                                  **End Date:** if applicable \_\_\_\_\_

**Frequency of Rotation:** Please describe

**Time of Day Requested for SCW:** \_\_\_\_\_ **# of SCW Courts Requested:** \_\_\_\_\_

Participation #'s:	Estimated At Start	Actual	Actual	Actual	Actual
<b># of SCW Club Members</b>					
<b># of Non SCW Recreation Card Holder Participants</b>					
	Date				

**Signature of Coordinator:** \_\_\_\_\_                                  **Date:** \_\_\_\_\_

**Request is APPROVED / DISAPPROVED** \_\_\_\_\_                                  **Date:** \_\_\_\_\_

SCW Pickleball Club Board

**Annual Activity Status:** (This area is filled out by the SCW Pickleball Club Board)

Enrollment Communication Sent to Membership: Date(s) \_\_\_\_\_

Enrollment List Provided to SCW PB Club: Date(s) \_\_\_\_\_

SCW Play Report Submitted: Date(s) \_\_\_\_\_

Annual Group Review for Renewal On:	Date _____	Approved / Disapproved	Initial _____
	Date _____	Approved / Disapproved	Initial _____
	Date _____	Approved / Disapproved	Initial _____
	Date _____	Approved / Disapproved	Initial _____

**Team Formation Instructions** Each new team/group will fill out this information.

The Pickleball Club will then use this information to complete a CR-14A with the SCW Recreation Activity Manager.

<b>Team/Group Name:</b> Enter a brief description of what your group or team will be called. Example: Men's & Ladies Beginners	<b>Enter the date you fill out Date:</b> _____ this form
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**Team/Group Coordinator:** First and last name of person who will be responsible for the on-going coordination of the team or group listed above for SCW. Also phone number & email.

**Reciprocal Communities:** Please List Contact Information: (Community, Name & Phone #)

List each Community that has an interest in reciprocal play, and their contact info: This is important because each of these people will be contacted by the SCW Recreation Activity Manager to insure they fit the rules of reciprocal play for SCW.

**Primary Focus of Play:**     **Competitive**    or     **Social**  
 Check the box that best describes your focus of team/group play.

**Enrollment Criteria or Requirements:** When **skill level** is listed as a requirement for the team/group: All potential participants are eligible to: self rate, use current stated rating, use tournament rating or seek to be rated. Note: It is the potential participant's responsibility to be able to play at a skill level comparable and described by the group's criteria. If a person is not, they may lose their eligibility to participate and/or play in that team/group: The USAPA self rating list is an excellent reference for this purpose in helping to determine if a potential participant may be eligible for skill level group/team participation.  
**Age requirements** will use actual Date of Birth and current age to determine eligibility. Any **social requirements** listed need to be adhered to by participants. Anyone not following the group needs may be ineligible for participation. **Other criteria** may be requested by teams on these forms that may need further instruction. These instructions may be amended by the SCW PB Club as needed.  
**Common Sense** and fair access needs to be used in all of the above Criteria or Requirements listed for teams & groups.

**Requested Calendar of Events for SCW:**  
 Enter the date you request for the first SCW play date      If your program has an end date due to seasonality or other reasons please enter it now.  
**Start Date:** \_\_\_\_\_      **End Date:** if applicable \_\_\_\_\_

**Frequency of Rotation:** Please describe  
 Describe the frequency of rotation between communities you are planning and requesting. Example: We wish to play once per week. Each week the Team will play at a different community that is involved. Since we have four communities, we will want to play at SCW 1 week out of four.

**Time of Day Requested for SCW:** List hours requested      **# of SCW Courts Requested:** \_\_\_\_\_

<b>Participation #'s:</b> Fill in the estimated numbers only.	<b>Estimated at Start</b>	<b>Actual</b>	<b>Actual</b>	<b>Actual</b>	<b>Actual</b>
<b># of SCW Club Members</b> participating each play date					
<b># of Non SCW Recreation Card Holder Participants</b> Total estimate of non SCW participants each play date					
Actuals and Dates will be completed by SCW PB Club Board					

**Signature of Coordinator:** \_\_\_\_\_      **Date:** \_\_\_\_\_

**Request is APPROVED / DISAPPROVED** \_\_\_\_\_      **Date:** \_\_\_\_\_

SCW Pickleball Club Board

**Annual Activity Status:** Leave this area blank. The SCW PB Club Board will use to monitor the group/team.

- Enrollment Communication Sent to Membership: Date(s) \_\_\_\_\_

- Enrollment List Provided to SCW PB Club: Date(s) \_\_\_\_\_

- SCW Play Report Submitted: Date(s) \_\_\_\_\_

- Annual Group Review for Renewal On:	Date _____	Approved / Disapproved	Initial _____
	Date _____	Approved / Disapproved	Initial _____
	Date _____	Approved / Disapproved	Initial _____

## SCW Pickleball Club – Reciprocal Play

### Coordinator(s) Pledge

As coordinator of a SCW Pickleball Club Reciprocal Play Team or Group...

I pledge the following:

- 1) I will follow the guidelines and rules set forth by SCW and the SCW Pickleball Club.
- 2) I will insure that all Club members, eligible for the team or group, will have equal access and potential participation of play.
- 3) I will continually work to grow the SCW team or group.
- 4) I will communicate, coordinate and manage the SCW team or group to insure all Club members have an equal opportunity to learn about reciprocal play.
- 5) I will strive to insure that SCW contributes our fair share of resources and time for the reciprocal play team or group that I coordinate and also strive that other eligible communities involved do the same.
- 6) I understand that reciprocal play can only take place on the approved resources and times allocated and that if any needs for reciprocal play change: i.e. # of courts, time of play, etc. all needs will require the advanced approval of the SCW Pickleball Club prior to any changes taking place.
- 7) I acknowledge that reciprocal play rights are secondary to SCW Pickleball Club rights, and that reciprocal play may be changed, canceled or terminated by the SCW Pickleball Club at any time.

Signed:

\_\_\_\_\_   
Team / Group Coordinator

\_\_\_\_\_   
Team / Group Coordinator – Assistant or Back Up Person

Name of Group: \_\_\_\_\_

Date: \_\_\_\_\_



## **SCW Pickleball Club Reciprocal Play Enrollment Announcement**

Note: Each Reciprocal Team Enrollment Announcement must contain the following informational topics. The announcement will be approved and sent by the SCW Pickleball Club.

**Team Enrollment – Announcement** – Note: This announcement will go out to all SCW Club members after the group / team has been approved for reciprocal play.

**The following team is forming:** (Name of Team)

**Coordinator of Team:** (Name, phone and email of person)

**Requirements or Criteria of Team / Group:** (Describe as needed)

**Communities Involved:** List

**Start Date:**

**Rotation of Play:** Describe dates and locations of play that are known

**Details:** Days, Times, Which Courts, Locations, Frequency of Play

**Message:** If you have questions or are interested in joining this group / team and are eligible please feel welcome to contact (name of coordinator listed above). You will be contacted before (date) to confirm you are enrolled and further details will be provided on dates of play and participation.

**Thank you for your interest!**

**Team Enrollment Roster Status: SCW Pickleball Club Members – Reciprocal Play** RTEAM Roster Status - Rev 4/13

Instructions to Coordinator:

1. Provide copy of updated Team Enrollment Roster Status to the Pickleball Club Board at end of each calendar quarter. 3/31, 6/30, 9/30, 12/31
2. Include all people who contacted you, that have interest and their status.
3. In Status Area: Check appropriate areas and include dates and info as indicated.

a. **Example:** *Jane Doe (Phone Number) 7/1/13 Interested X Yes Fits X Blank 7/1/13 Blank*  
*Jamie Smith (Phone Number) 8/2/13 Interested X Blank X wrong skill level Blank Blank*

**Name of Group/Team:** \_\_\_\_\_

**Coordinator:** Name \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

**Enrollment List and Status:**

#	Name (First & Last)	Phone #	Contact Date	Team Enrollment Status				
				Interest Only (X)	Yes Fits Criteria (X)	Does Not Fit Criteria (Reason)	Enrolled (Date)	Quit Team (Date)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

Continue Information as needed on reverse side of this form

## Team Enrollment Roster Status: Side B Continuation

Instructions to Coordinator:

4. Provide copy of updated Team Enrollment Roster Status to the Pickleball Club Board at end of each calendar quarter. 3/31, 6/30, 9/30, 12/31
5. Include all people who contacted you, that have interest and their status.
6. In Status Area: Check appropriate areas and include dates and info as indicated.

a. Example: *Jane Doe (Phone Number) 7/1/13 Interested X Yes Fits X Blank 7/1/13 Blank*  
*Jamie Smith (Phone Number) 8/2/13 Interested X X wrong skill level Blank Blank Blank*

### Enrollment List and Status:

#	Name (First & Last)	Phone #	Contact Date	Team Enrollment Status				Enrolled (Date)	Quit Team (Date)
				Interest Only (X)	Yes Fits Criteria (X)	Does Not Fit Criteria (Reason)			
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
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30									
31									
32									
33									
34									
35									
36									

Please use a new form if more room for information is needed.

Instructions:

1. Insure all participants fill out information each play date
2. Submit a copy of all activity reports to SCW PB Club at end of each month.
3. Players should print or write legibly - THANK YOU!

## Reciprocal Play (Activity Report) – SCW Pickleball Club

Team or Group Name: \_\_\_\_\_ Coordinator: \_\_\_\_\_

Date of Play SCW: \_\_\_\_\_ Time of Play: \_\_\_\_\_ Courts Approved: \_\_\_\_\_

#	Time	First and Last Name	Community	ID #	SCW Club Member (X)	Non SCW Member (X)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
20						
21						
22						
23						

Continue information on other side of this form for play date listed above.

Continue information below – Side B for date of play listed on other side.

#	Time	First and Last Name	Community	ID #	SCW Club Member (X)	Non SCW Member (X)
24						
25						
26						
27						
28						
29						
30						
31						
32						
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47						
48						
49						
50						

If more room for information is needed, please start a new form and list appropriate date and info at top.

