

PLEASE PRINT CLEARLY AND SPELL FULL NAMES CORRECTLY

ONTARIO TENPIN BOWLING ASSOCIATION

Division: ☐ Women ☐ Men ☐ Mixed

Local Association Name _____
 Team Name _____
 Team Captain's Name _____ Email _____
 Street Address & City _____
 Postal Code _____ Phone # _____

4 Person Teams

SATURDAY May 16 & 23

Shifts - 9am, 12pm, 4pm

SUNDAY May 17 & 24

Shifts - 9am, 12pm, 4pm

WE WANT TO BOWL: _____ at _____

OUR 2nd CHOICE: _____ at _____

List team members in the order in which they will bowl

| | Bowler Name | Scratch (optional) | Gender | CTF Number | Highest Average 2018-2019 (2-A) | If no 2018-2019 Avg (2-B, C, D) |
|---|-------------|--------------------------|--------|------------|---------------------------------------|------------------------------------|
| 1 | | <input type="checkbox"/> | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |

Doubles and Singles are bowled consecutively, Singles following immediately after Doubles. You cannot bowl Doubles or Singles only. You must bowl both events. (see Rule 4) (scratch see Rule 13)

Double and Singles

SATURDAY May 16 & 23

Shifts - 9am, 12pm, 4pm

SUNDAY May 17 & 24

Shifts - 9am, 12pm, 4pm

WE WANT TO BOWL: _____ at _____

OUR 2nd CHOICE: _____ at _____

List team members in the order in which they will bowl

| All Events HDCP | Scratch | | Bowler Name | Scratch (optional) | Gender | CTF Number | Highest Average 2018-2019 (2-A) | If no 2018-2019 Avg (2-B, C, D) |
|--------------------------|--------------------------|---|-------------|--------------------------|--------|------------|---------------------------------------|------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | 1 | | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 2 | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 | | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 2 | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 | | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 2 | | | | | | |

☐ Cheque/Money Order

☐ E-Transfer

| | Handicap | Scratch |
|-------------------|----------|---------|
| 4Person Team \$ | | |
| Singles \$ | | |
| Doubles \$ | | |
| All Events \$ | | |
| Total Enclosed \$ | | |

Total \$

Tournament Director use only

Date Received

Amount Received

Entry No

Ok

Refund

4 Person Team

D & S Pair

Team Captain Signature

REMEMBER - Multiple participation is possible (See Rule 4)

Make cheques payable to Windsor Essex Chatham Kent Bowling Association (WECKBA)