



LBA 2014 Season Ending Tournament Entry Form

PLEASE COMPLETE ALL REQUESTED INFORMATION BELOW

Official Use Only

Check #: _____ / _____

Cash: _____

Entry #: _____

Bowler 1
(Frames 1-3-5-7-9)

Bowler 2
(Frames 2-4-6-8-10)

Name			Select Squad Time	
USBC Sanction #			<input type="checkbox"/> 11:00 AM (A)	<input type="checkbox"/> 12:00 PM (B)
Highest 2012-13 Avg			<input type="checkbox"/> 1:00 PM (C)	< Oil Lanes >
Address			<input type="checkbox"/> 3:00 PM (D)	<input type="checkbox"/> 4:00 PM (E)
Phone #			<input type="checkbox"/> 5:00 PM (E)	< Oil Lanes >
			<input type="checkbox"/> 7:00 PM (F)	<input type="checkbox"/> 8:00 PM (G)
			<input type="checkbox"/> 9:00 PM (H)	

I/WE HAVE READ AND UNDERSTAND ALL THE TOURNAMENT RULES ON THIS FORM AND HAVE ENCLOSED A CHECK MADE PAYABLE TO LORAIN USBC BA:

Bowler 1 Bowler 2 (Check to acknowledge you have read and comply the above statement.)



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