ONTARIO OPEN 5 PIN CHAMPIONSHIPS BOWLER'S QUESTIONNAIRE

PLEASE NOTE: FAILURE TO COMPLETE THIS QUESTIONNAIRE IN FULL COULD RESULT IN YOUR SUSPENSION FROM COMPETITION. IF YOU HAVE CHANGED YOUR NAME IN THE LAST YEAR PLEASE INDICATE YOUR MAIDEN NAME IN BRACKETS BESIDE YOUR NAME. EXAMPLE: BRENDA WALTERS (CAMPBELL) THIS INFORMATION IS EXTREMELY IMPORTANT IN ORDER FOR THE PROVINCIAL OFFICE TO MAINTAIN ACCURATE RECORDS FOR THE NUMBER OF YEARS YOU HAVE QUALIFIED FOR THE ONTARIO OPEN.

Zone Association You Are Representing:
Name:
Address:
City:Postal Code:
Telephone – Home: { }Business: { }
E-Mail Address:
O5PBA Membership Number:
BOWLING STATISTICS
Please Indicate: Right-handed { } Left-handed { }
Number of Years Bowling:Current Average:
Match Play Experience: Yes { } No { }
High Games: SingleTripleFiveTen
Line-Up Preference: Number of Steps in Approach:
OPEN EXPERIENCE
Number of Years on a Team:Number of Years as a Singles Rep:
Highest Team Finish:Highest Singles Finish:
Number of Years in the Masters:
Are you currently a Master? Yes { } No { }
If so, please indicate division below:
Tournament Division { } Teaching Division { } Senior Division { }
Ontario Open-Bowler's Questionnaire 9/26/2006