



Ontario 5 Pin Bowlers' Association

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HOLIDAY CLASSIC 5 PIN CHAMPIONSHIPS BOWLER & COACH INFORMATION FORM (To be sent in by the Coach)

This form **MUST** be completed and returned to the Coach along with the appropriate payment. ***POST-DATED CHEQUES WILL NOT BE ACCEPTED AND NO ROOMS WILL BE BOOKED ON AN INDIVIDUAL BASIS!*** All forms must reach the Provincial Office no later than **MONDAY, MARCH 17, 2008**.

Bowling Centre your Team Represents: _____

Indicate: Bowler { } Coach { }

Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone: { } _____ Membership No.: _____

Please indicate your T-Shirt size: _____

AVERAGE CLARIFICATION

Bowler's highest league average as recorded in the Average Book: _____

Bowler's highest league average up to and including **MARCH 2, 2008**: _____
(Enclose copy of individual average sheet(s) if not in the Average Book)

FRIDAY NIGHT WELCOME RECEPTION

This function is **FREE TO ALL BOWLERS, COACHES AND GUESTS**.

Will you be attending the Friday Welcome Reception? Yes { } No { }

Number of Guests Attending: _____

