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HIGH-LOW DOUBLES 5 PIN CHAMPIONSHIPS BOWLER INFORMATION FORM

This form MUST be completed and returned to the Provincial Office no later than MONDAY, JANUARY 22, 2007. After this date, we will not be able to guarantee that any rooms will be available. Please return this form along with your payment for hotel accommodation and guest banquet tickets (if applicable) prior to the deadline date to avoid any disappointment.

Zone/Decentralized Association:	
Name:	
Address:	
City:	Postal Code:
Telephone: { }	Membership No.:
E-Mail Address:	
Please indicate your T-Shirt size:	
AVERAGE CLARIFICATION	
Bowler's highest league average up to and including JANUARY 7 , 2007 : (Enclose copy of individual average sheet(s) if not in the Average Book) NOTE: THIS WILL CERTIFY THAT MY AVERAGE AS INDICATED ABOVE WAS ACHIEVED BY USING THE FOLLOWING BOWLING HAND: LEFT HANDED() RIGHT HANDED() Signature of Participant:	
BANQUET INFORMATION	
To be held on Saturday evening at the Hamilton Convention Centre in Chedoke Ballrooms A & B. Bowlers are FREE OF CHARGE . All guest tickets are \$30.00, GST included. Banquet includes dinner, awards presentations and a dance.	
Will you be attending the Banquet? Yes {	} No { }
Number of Guest Tickets Required:	
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Payment enclosed for @ \$30.00 each = \$	
# Guest Tickets	
HOTEL ACCOMMODATION	
Accommodation has been arranged at the Sheraton Hamilton Hotel. The room rate is \$80.00 plus 3% DMF (\$2.40), 5% PST (\$4.00) and 6% GST (\$4.80) for a total of \$91.20 per night, based on single or double occupancy. For additional persons in a room over two, \$5.60 (taxes included) per person per night will apply. PLEASE NOTE – MAXIMUM OF FOUR (4) PEOPLE IN A ROOM. Check-in time at the hotel is 3:00 p.m. and twenty-four (24) hours notice is required for any room cancellations. To receive this rate, all rooms must be booked through the Ontario 5 Pin Bowlers' Association. We will accept payment by cheque, money order, VISA or Mastercard. Please make your cheque or money order payable to the "Ontario 5 Pin Bowlers' Association". POST-DATED CHEQUES WILL NOT BE ACCEPTED.	
I will require hotel accommodation for:	
FRIDAY, FEBRUARY 23, 2007 { }	
SATURDAY, FEBRUARY 24, 2007 { }	
Please Indicate: *Smoking Room { } 1 Bed { } Non-Smoking { } 2 Beds { } * SUBJECT TO HOTEL AVAILABILITY	
Please list all person(s) occupying room:	
1 3	
2 4	
METHOD OF PAYMENT	
Please Indicate: Cheque { } Money Order { } ** VISA { } ** Mastercard { }	
** <u>NOTE</u> : IF YOU ARE PAYING BY CREDIT CARD, YOUR PAYMENT WILL BE PROCESSED TO YOUR CREDIT CARD ON THE DATE WE RECEIVE THIS BOWLER INFORMATION FORM	
Payment is enclosed in the amount of \$	
Please charge my credit card for: Hotel Accommodation and Guest Banquet Tickets { } Hotel Accommodation Only { }	
Cardholder's Name:(PLEASE PRINT)	
Credit Card Number:Expiry Date:	
Signature of Cardholder:(APPROVAL FOR PAYMENT BY CREDIT CARD)	