ONTARIO 5 PIN BOWLERS' ASSOCIATION

RECORD SCORES REPORT FORM

GENERAL NOTES

NOTES FOR COMPLETING FORMS:

A. WHEN COMPLETING THE DATE FIELD ON THIS FORM, PLEASE USE THIS FORMAT: 01 SEP 12. WE NEED THE MONTH SPELLED OUT TO AVOID ANY CONFUSION ABOUT WHEN THE RECORD WAS BOWLED.

B. FOR 6 PLAYER TEAM: WHEN SUBMITTING RECORD SCORES, SIX PLAYER TEAMS ARE NOT ELIGIBLE FOR BOTH 6 PLAYER TEAM RECORDS AND 5 PLAYER TEAM RECORDS. THEY MUST BE SUBMITTED FOR UNDER ONE CATEGORY ONLY.

C. FOR 6 PLAYER TEAM MIXED CATEGORY: TO QUALIFY AS A MIXED TEAM, THERE MUST BE AT LEAST ONE (1) PLAYER OF THE OPPOSITE GENDER ON THE TEAM.

1   If your association keeps five game records, please list them on the additional
     form provided.

2   All Record Score reports are tabulated at the end of each bowling season.
     Plaques recognizing the season's highest single, triple, four and five game scores
     by individual men and ladies in each of the five average classifications will be presented.

3   All affiliated league secretaries are provided with instructions and sets of forms
     in their Secretary's Handbook. They are asked to complete those forms and submit to you
     by **May 15, 2015**. You should collect these forms from all affiliated leagues and then complete
     this form ensuring that all bowlers named are members of your Local Association.
     Please include the bowler's membership number.

4   Please do not submit any reports to the office on the forms contained in the Secretary's
     Handbook. They must be submitted on this report form. All Decentralized Associations
     must file their report with **BOTH** the Provincial Office and their Zone Association.

5   Included with this year's forms are provisions for recording six player team
     records. These are for teams that bowl six and count six. These scores are
     recognized at the Canadian level and we will start recognizing them at the
     Provincial level.

RECORD SCORES REPORT FORM
REPORT DUE ON OR BEFORE May 25, 2015

ASSOCIATION: _____   ZONE INITIAL: _____
CHAIR: _____   DATE OF REPORT: _____
E-MAIL: _____   TELEPHONE #: _____

LADIES' INDIVIDUAL CLASSIFIED RECORDS

Class 1 (0 - 155)
eg. 1 Sep 14

Class 1	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 2 (156 - 175)
eg. 1 Sep 14

Class 2	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 3 (176 - 195)
eg. 1 Sep 14

Class 3	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 4 (196 - 215)
eg. 1 Sep 14

Class 4	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 5 (216 - UP)
eg. 1 Sep 14

Class 5	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

MENS' INDIVIDUAL CLASSIFIED RECORDS

Class 1 (0 - 165)

eg. 1 Sep 14

Class 1	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 2 (166 - 185)

eg. 1 Sep 14

Class 2	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 3 (186 - 205)

eg. 1 Sep 14

Class 3	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 4 (206 - 225)

eg. 1 Sep 14

Class 4	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Class 5 (226 - UP)

eg. 1 Sep 14

Class 5	Score	Name and Membership Number	Bowling Centre & League	Date Bowled
Single				
Triple				
Four				
Five				

Record Scores Report due on or before May 25, 2015

This form to be used for all **TWO (2)** player *LADIES' TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **TWO (2)** player *MEN'S TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **TWO (2)** player *MIXED TEAM CLASSIFIED* records.

SINGLE GAME		
Bowling Centre:		
League Name:		
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

TRIPLE GAME		
Bowling Centre:		
League Name:		
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

FOUR GAMES		
Bowling Centre:		
League Name:		
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **THREE (3)** player *LADIES' TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **THREE (3)** player *MEN'S TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **THREE (3)** player *MIXED TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **FOUR (4)** player *LADIES' TEAM CLASSIFIED* records.

SINGLE GAME		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

TRIPLE GAME		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

FOUR GAMES		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **FOUR (4)** player *MENS' TEAM CLASSIFIED* records.

SINGLE GAME		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

TRIPLE GAME		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

FOUR GAMES		
Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		SCORE
	TEAM TOTAL	

This form to be used for all **FOUR (4)** player *MIXED TEAM CLASSIFIED* records.

To qualify as a mixed team, there must be at last *ONE (1)* player of the opposite gender on the team.

SINGLE GAME

Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

TRIPLE GAME

Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

FOUR GAMES

Bowling Centre:		
League Name:		
Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

This form to be used for all **FIVE (5)** player *LADIES' TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		

FOUR GAMES		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		

This form to be used for all **FIVE (5)** player *MEN'S TEAM CLASSIFIED* records.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		

FOUR GAMES		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		

This form to be used for all **FIVE (5)** player *MIXED TEAM CLASSIFIED* records.

To qualify as a mixed team, there must be at least *ONE (1) player* of the opposite gender on the team.

SINGLE GAME		
Bowling Centre:		
League Name:		
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER		**SCORE**
	TEAM TOTAL	

TRIPLE GAME			
Bowling Centre:			
League Name:			
Team Name:	**Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER		**GMS**	**SCORE**
	TEAM TOTAL		

FOUR GAMES			
Bowling Centre:			
League Name:			
Team Name:	**Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER		**GMS**	**SCORE**
	TEAM TOTAL		

Record Scores Report due on or before May 25, 2015

This form to be used for **all SIX (6)** player *LADIES' TEAM CLASSIFIED* records.

To be used where teams count all **six (6)** scores for their team totals.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERHIP NUMBER	**SCORE**
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERHIP NUMBER	**SCORE**
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name:	**Date Bowled:**	
PLAYER'S NAME AND MEMBERHIP NUMBER	**SCORE**
TEAM TOTAL	

This form to be used for **all SIX (6)** player *MEN'S TEAM CLASSIFIED* records.

To be used where teams count all **six (6)** scores for their team totals.

SINGLE GAME	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER	SCORE
TEAM TOTAL	

TRIPLE GAME	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER	SCORE
TEAM TOTAL	

FOUR GAMES	
Bowling Centre:	
League Name:	
Team Name: Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER	SCORE
TEAM TOTAL	

This form to be used for **all SIX (6)** player *MIXED TEAM CLASSIFIED* records.

To be used where teams count all six (6) scores for their team totals. To qualify as a mixed team, there must be at least one (1) player of the opposite gender on the team.

SINGLE GAME

Bowling Centre:

League Name:

Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER		**SCORE**
	TEAM TOTAL	

TRIPLE GAME

Bowling Centre:

League Name:

Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER		**SCORE**
	TEAM TOTAL	

FOUR GAMES

Bowling Centre:

League Name:

Team Name:	Date Bowled:	
PLAYER'S NAME AND MEMBERHIP NUMBER		**SCORE**
	TEAM TOTAL	

Record Scores Report due on or before May 25, 2015

This form to be used for all **FIVE (5)** game *CLASSIFIED* records.

LADIES' TEAM FIVE (5) GAME	
Bowling Centre:	
League Name:	
Team Name: **Date Bowled:**	
PLAYER'S NAME AND MEMBERSHIP NUMBER	**SCORE**
TEAM TOTAL	

MENS TEAM FIVE (5) GAME		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		

To qualify as a mixed team, there must be at least *ONE (1) player* of the opposite gender on the team.

MIXED TEAM FIVE (5) GAMES		
Bowling Centre:		
League Name:		
Team Name: **Date Bowled:**		
PLAYER'S NAME AND MEMBERSHIP NUMBER	**GMS**	**SCORE**
TEAM TOTAL		