



Ontario 5 Pin Bowlers' Association

2014–2015 Membership Chair Final Report Form

This form must be emailed to the Provincial Office at incentive@o5pba.ca on or before **March 27, 2015.**

Number of Registered **“Tournament”** Members: _____

Number of Registered **“Regular”** Members: _____

Number of Registered **“Senior”** Members: _____

Number of Registered **“SOO/Blind”** Members: _____

Number of Registered **“YBC under 18”** Members: _____

Number of Registered **“Graduated YBC Senior”** Members: _____

Number of Registered **“Duplicate”** Members: _____

Total Number of Members: _____

Zone/DC Association: _____

Membership Chair: _____

Date of Report: _____

Note: A copy of this report must be filed with the Zone Association.