



Ontario 5 Pin Bowlers' Association

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CONVENTION VOTING DELEGATE FORM

Zone/Decentralized Association: _____

Secretary's Name: _____

**ZONE ASSOCIATIONS WILL RECEIVE FOUR (4) VOTES AND
DECENTRALIZED ASSOCIATIONS WILL RECEIVE ONE (1) VOTE**

VOTING DELEGATE #1: _____

Address: _____

City: _____ Postal Code: _____

VOTING DELEGATE #2: _____

Address: _____

City: _____ Postal Code: _____

VOTING DELEGATE #3: _____

Address: _____

City: _____ Postal Code: _____

VOTING DELEGATE #4: _____

Address: _____

City: _____ Postal Code: _____