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## ONTARIO OPEN 5 PIN CHAMPIONSHIPS ZONE QUALIFIERS REPORT FORM

**PLEASE NOTE: TOURNAMENT DIRECTORS ARE REQUESTED TO COMPLETE THIS REPORT FORM AND RETURN TO THE PROVINCIAL OFFICE NO LATER THAN DECEMBER 19, 2011.**

Please indicate the total number of bowlers competing in your Zone roll-off:

**MEN:** \_\_\_\_\_ **LADIES:** \_\_\_\_\_ **TOTAL:** \_\_\_\_\_

Zone Association: \_\_\_\_\_

Tournament Director: \_\_\_\_\_

Zone Roll-off Sites: \_\_\_\_\_

Date of Report: \_\_\_\_\_

### MEN'S TEAM

1. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

2. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

3. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

4. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

5. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

6. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

<b>LADIES' TEAM</b>
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1. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

2. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]
3. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]
4. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]
5. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]
6. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

<b>MIXED TEAM</b>
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1. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

2. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

3. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

4. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

5. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_

O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

6. Name: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

<b>ALTERNATES</b>
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Alternate Man: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]

Alternate Lady: \_\_\_\_\_ 20 Game Score: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: {    } \_\_\_\_\_  
O5PBA Membership No.: \_\_\_\_\_ Open Rookie: Yes [    ] No [    ]