

ONTARIO OPEN 5 PIN CHAMPIONSHIPS BOWLER'S QUESTIONNAIRE

PLEASE NOTE: FAILURE TO COMPLETE THIS QUESTIONNAIRE IN FULL COULD RESULT IN YOUR SUSPENSION FROM COMPETITION. IF YOU HAVE CHANGED YOUR NAME IN THE LAST YEAR PLEASE INDICATE YOUR MAIDEN NAME IN BRACKETS BESIDE YOUR NAME. EXAMPLE: BRENDA WALTERS (CAMPBELL) THIS INFORMATION IS EXTREMELY IMPORTANT IN ORDER FOR THE PROVINCIAL OFFICE TO MAINTAIN ACCURATE RECORDS FOR THE NUMBER OF YEARS YOU HAVE QUALIFIED FOR THE ONTARIO OPEN.

Zone Association You Are Representing: _____

Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone – Home: { } _____ Business: { } _____

E-Mail Address: _____

O5PBA Membership Number: _____

BOWLING STATISTICS

Number of Years You Have Bowled: _____ Current Average: _____

High Games: Single _____ Triple _____ Five _____ Ten _____

Line-Up Preference: _____ Match Play Experience: Yes { } No { }

PROVINCIAL OPEN EXPERIENCE

Total Number of years you have qualified for the Open: _____

Number of Years on a Team: _____ Number of Years as a Singles Rep: _____

Highest Team Finish: _____ Highest Singles Finish: _____