Ontario 5 Pin Bowlers' Association

EXECUTIVES' 5 PIN CHAMPIONSHIPS
ZONE/DC ASSOCIATION EXECUTIVES' ENTRY FORM

This form <u>MUST</u> be completed and returned to the Provincial Office no later than <u>JANUARY 19, 2015</u>. Please return this form along with your payment for entry fee ($42.94) and guest luncheon tickets (if applicable) prior to the deadline date.

Zone/Decentralized Association: _____

Position Held within Zone/DC Association: _____
(<u>Note</u>: Executive Listing must be filed with the Provincial Office and will be verified)

Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone: {   } _____ Membership No.: _____

E-Mail Address: _____

AVERAGE CLARIFICATION

Rolling Average as recorded in the Average Book/O5PBA Website: _____

Bowler's highest league average up to and including **JANUARY 4, 2015**: _____
(Enclose copy of individual average sheet(s) if not in the Average Book)

Do you bowl in other leagues not included in the rolling average above?   (   ) Yes   (   ) No

If **YES** please list the league(s) below and indicate type of membership in said league(s):	Membership Type	Not a Member

I am aware of the rules and regulations of 5 pin bowling and to the best of my knowledge, I declare the information contained on the form to be true and accurate. Please sign below acknowledging that you have read and provided all the information required.

_____   _____
Member's Signature   Date

LUNCHEON INFORMATION

To be held on Saturday after bowling at Sherwood Centre in the Kegler's Lounge. Bowlers are **FREE OF CHARGE**. All guest tickets are $10.00 (HST included).

Will you be attending the Luncheon?   Yes {   }   No {   }

Number of **GUEST TICKETS ONLY** you are ordering:_____

Payment Enclosed for _____ @ $10.00 each = $ _____
                       # GUEST TICKETS

METHOD OF PAYMENT

Please Indicate: Cheque {   }   Money Order {   }   ** VISA {   }   ** Mastercard {   }

*** NOTE: IF YOU ARE PAYING BY CREDIT CARD, YOUR PAYMENT WILL BE PROCESSED TO YOUR CREDIT CARD ON THE DATE WE RECEIVE THIS BOWLER INFORMATION FORM*

Payment is enclosed for: Guest Luncheon Tickets   {   }
                              Entry Fee - $42.94 (HST Included)   {   }

Payment is enclosed in the amount of $_____

Cardholder's Name:_____
(PLEASE PRINT)

Credit Card Number:_____Expiry Date:_____

Signature of Cardholder:_____
(APPROVAL FOR PAYMENT BY CREDIT CARD)