ONTARIO \$10,000 SHOOT-OUT LEAGUE ROUND WINNER'S REPORT FORM

Lea	gue Name:				
Bow	ling Centre:				
Zon	e/Decentralized Assoc	ciation:			
Lea	gue Secretary:				
Address:		C	City:		
Postal Code:		Telephone: {	Telephone: { }		
E-M	ail Address:				
bow	ler is not listed in the uding JANUARY 29, 2	Zone Average Book, provide the	in the Zone Average Book. If a highest league average up to and age sheet(s). All averages will be		
1.	Name:	Average:	Telephone:		
2.	Name:	Average:	Telephone:		
3.	Name:	Average:	Telephone:		
4.	Name:	Average:	Telephone:		
5.	Name:	Average:	Telephone:		
6.	Name:	Average:	Telephone:		
7.	Name:	Average:	Telephone:		
8.	Name:	Average:	Telephone:		
9.	Name:	Average:	Telephone:		

(PLEASE TURN OVER)

10.	Name:	Average:	Telephone:
11.	Name:	Average:	Telephone:
12.	Name:	Average:	Telephone:
13.	Name:	Average:	Telephone:
14.	Name:	Average:	Telephone:
15.	Name:	Average:	Telephone:
16.	Name:	Average:	Telephone:
17.	Name:	Average:	Telephone:
18.	Name:	Average:	Telephone:
19.	Name:	Average:	Telephone:
20.	Name:	Average:	Telephone:
21.	Name:	Average:	Telephone:
22.	Name:	Average:	Telephone:
23.	Name:	Average:	Telephone:
24.	Name:		
25.			Telephone:

At the completion of your League Round, please send this League Round Winner's Report Form IMMEDIATELY to your ZONE OR DECENTRALIZED ASSOCIATION TOURNAMENT DIRECTOR