## **ZONE/DC ASSOCIATION VISITATION REPORT**

Zone Association:		
Decentralized Association:		
Secretary's Signature:		
Contact Person:		
Business Telephone: ( )		
Home Telephone: ( )		
E-Mail Address (Print Clearly):		
It is the intention of the Provincial Board of Directors to attend an Association Board Meeting during the 2011-2012 bowling season in order to answer any question or concerns you may have regarding programs, etc. (Schedules Permitting).		
We would like to be contacted to set-up a visitation by the O5PBA Board of Directors (Yes or No):		
MEETING #1		
O5PBA to Attend Date:Location:		
(Check Box)		
MEETING #2		
O5PBA to Attend (Check Box)  Location:		
MEETING #3		
O5PBA to Attend (Check Box)  Location:		
·		
MEETING #4		
O5PBA to Attend (Check Box)  Location:		

ZONE/DC VISIT.INC 31/08/2011-TURN OVER

	MEETING #5
	Date:Location:
(Check Box)	
	MEETING #6
	MEETING #6
O5PBA to Attend	Date:Location:
(Check Box)	DateLocation
,	
	MEETING #7
OSPRA to Attend	
(Check Box)	Date:Location:
(Check box)	
	MEETING #8
ш	
O5PBA to Attend	Date:Location:
(Check Box)	
	ANNUAL OFNEDAL MEETING
	ANNUAL GENERAL MEETING
O5PBA to Attend	Date:Location:
(Check Box)	DateLocation
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## PLEASE COMPLETE THE DATE AND LOCATION FOR ALL OF YOUR SCHEDULED ZONE AND DECENTRALIZED ASSOCIATION MEETINGS

DEADLINE FOR SUBMISSION: MONDAY, NOVEMBER 7, 2011