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YOUTH CHALLENGE 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 2, 2012**.

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

MEN: _____ **LADIES:** _____ **TOTAL:** _____

Zone Association: _____

Tournament Director: _____

YBC Program Director: _____

Zone Roll-off Site: _____

Date of Report: _____

MEN'S TEAM

1. Name: _____ Age: _____

Address: _____

City: _____ Postal Code: _____

Telephone: { } _____ 5 Game Score: _____

2. Name: _____ Age: _____

Address: _____

City: _____ Postal Code: _____

Telephone: { } _____ 5 Game Score: _____

3. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____
4. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____
5. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

LADIES' TEAM

1. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____
2. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____
3. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

4. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

5. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

MIXED TEAM

1. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

2. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

3. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

4. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

NEXT HIGHEST QUALIFIER (Male or Female)
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5. Name: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

ALTERNATES

Alternate Man: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____

Alternate Lady: _____ Age: _____
Address: _____
City: _____ Postal Code: _____
Telephone: { } _____ 5 Game Score: _____