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YOUTH CHALLENGE ZONE QUALIFIERS REPORT FORM

PLEASE NOTE: TOURNAMENT DIRECTORS ARE REQUESTED TO COMPLETE THIS REPORT FORM AND E-MAIL (results@o5pba.ca), FAX (416-426-7364) OR MAIL TO THE ABOVE NOTED ADDRESS IMMEDIATELY FOLLOWING THE CONCLUSION OF YOUR ROLL-OFF.

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

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

Zone Association: _____

Tournament Director: _____ Date of Report: _____

Host Bowling Centre: _____

Date of Roll-off: _____

MEN'S TEAM

1. Name: _____ Age: _____

Address: _____ City: _____

Postal Code: _____ Telephone: { } _____

5 Game Score: _____ November 1, 2015 Average: _____

2. Name: _____ Age: _____

Address: _____ City: _____

Postal Code: _____ Telephone: { } _____

5 Game Score: _____ November 1, 2015 Average: _____

3. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____
4. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____
5. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

LADIES' TEAM

1. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____
2. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

3. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

4. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

5. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

MIXED TEAM

1. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

2. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

3. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

4. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

NEXT HIGHEST QUALIFIER (Male or Female)
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5. Name: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

ALTERNATES

Alternate Man: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____

Alternate Lady: _____ Age: _____
Address: _____ City: _____
Postal Code: _____ Telephone: { } _____
5 Game Score: _____ November 1, 2015 Average: _____