## PROVINCIAL TRIPLES TOURNAMENT LEAGUE ROUND WINNER'S REPORT FORM

League Name:		
Bowling Centre:		
Zone/Decentralized Association:		
League Secretary:		
Address:		City:
Postal Code:	Telephone: {	}
E-Mail Address:		
Duranida harrilada hisbaat la anna		in the Zana Arranana Daale. If a
bowler is not listed in the Zone A	Average Book, provide attach a copy of the aver	in the Zone Average Book. If a highest league average up to and rage sheet(s). All averages will be
	WINNING TEAM #1	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
		Telephone:
	WINNING TEAM #2	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #3	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:		Telephone:
	WINNING TEAM #4	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:

(PLEASE TURN OVER)

## **WINNING TEAM #5**

Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #6	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #7	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #8	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #9	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	Telephone:
	WINNING TEAM #10	
Name:	Average:	Telephone:
Name:	Average:	Telephone:
Name:	Average:	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