MUST BE FILED IN DUPLICATE BY OCTOBER 31ST, 2012

5			
P _B Ontario	5 Pin Bowlers	' Association	
27			
	ARIO OPEN CHAM		
DECLA	RATION OF INTE	<u>NT</u>	
BOWLER	COACH	BOTH	
Date:			
To:	,	Tournament Director	
10:	(Zone)		
I,(Print Name)	hereby state my intent to	bowl/coach in the Zone	
	wling season in the above-named Z a registered O5PBA member in the		
	League at		
(League Name)	(Bowling Cen	gue at (Bowling Centre Name)	
In the prior season I bowled a min I am declaring in, and I am listed o my eligibility to declare. The Lea	nt year average sheet confirming paimum of fifty (50) games in a sand in the o5pba.ca website average bounderstand that the cost of a zone	ctioned league of the zone ok for said league to verify o indicate that my current	
	——————————————————————————————————————	gnature)	
I verify that the information for the	above named person is true.		
(SECRETARY'S NAME)	(SECRETARY'S SIGNATURE)	(DATE)	
NAME:			
	CITY:		
PUSTAL CODE:	TELEPHONE #: ()	

RECEIVED BY ______ DATE ______
(Tournament Director)