

OPEN CHAMPIONSHIP

Entry Form

By completing this form you acknowledge that you have reviewed and agree to abide by the Tournament Rules and Regulations as posted in your bowling center or found on the Central Alberta 5 Pin Bowlers' Association website at http://www.centralalberta5pin.com or e-mail: gen@centralalberta5pin.com

Submit entry

1. \$220 to be postmarked by Sunday, January 21st, or

Name (<u>PLEASE PRINT</u>)

2. \$245 if postmarked on or after Monday, January 22nd, with no guarantee of acceptance.

Address

		11441688					
	City						
		()					
	e-mail address if you are not currently receiving our newsletter						
	Canadian 5 Pin						
		Gender					
	19 years of age	Y	es	No			
Verification of age, residency and membership is required at the Championships. All Central 5 Pin events are following current Health Regulations and are subject to change. All Provincial participants are required to participate in fundraising (selling raffle & elimination draw tickets). Please initial to acknowledge you have read and agree with this requirement (initials)							
I agree to abide by these rules and the decisions of the Central Alberta 5 Pin Bowlers' Association Open Championship Committee.							
Signature:Date:						_	
Tournament Chair		Cindy Seifried	Address: Box 997, Blackfalds, TOM OJO Email: pres@centralalberta5pin.com				
Please make cheques payable to "Central Alberta 5 Pin Bowlers' Association" $A 25.00 fee will be charged for each dishonored cheque.							
	E-transfers can be made to pres@centralalberta5pin.com						

Office use only Received Date: _____ Cash: ____ Cheque #: ____ E-Transfer: ____