

THE NATIONAL BOWLING ASSOCIATION, INC.
41ST ANNUAL WESTERN REGIONAL JUNIOR CHAMPIONSHIP TOURNAMENT
Entries Close: March 18, 2017

Official Use Only
Do Not Write in this Space

Date Rec'd _____
 Amount Rec'd _____
 Entry No. _____

TOURNAMENT DATE (X) preferred date:

_____ **Saturday, April 1, 2017**

_____ **Sunday, April 2, 2017**

TOTAL ENTRY FEE PER PERSON: \$30.00

| ENTRY FEE | |
|-------------------------|----------------|
| Bowling | \$15.00 |
| Awards | 11.00 |
| Expenses | 3.10 |
| AJR Donation | .90 |
| TOTAL per bowler | \$30.00 |

Only remit \$15 per bowler with entry form

| TEAM EVENT | | |
|------------|-------------|---------|
| Class | Division | Scratch |
| 1 | 700 & Over | 840 |
| 2 | 699-600 | 800 |
| 3 | 599-440 | 720 |
| 4 | 439-237 | 560 |
| 5 | 236 & Under | 400 |

| SINGLES/DOUBLES EVENT | | |
|-----------------------|-------------|------------|
| Class | Doubles | Singles |
| 1 | 350 & Over | 175 & Over |
| 2 | 349-300 | 174-150 |
| 3 | 299-220 | 149-110 |
| 4 | 219-120 | 109-60 |
| 5 | 119 & Under | 59 & Under |

Bowling Center: _____ Center Certification Number: _____

| TEAM NAME: | | SENATE: | | TEAM CAPTAIN: | | | |
|-----------------------------|------------|--------------|--------------|---------------------------|-----------------------|---------------------------------------|--------------------------------|
| List Names in Bowling Order | Sex M/F | TNBA Cert No | USBC Cert No | Birthdate (mm/dd/yyyy) | Age as of 8/1/2016 | AVG as of 2/28/2017 (21+ games) | Official Use Only (DIV / HDCP) |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |

| DOUBLES/SINGLES | | SENATE: | | | | | | |
|-----------------------------|------------|--------------|--------------|---------------------------|-----------------------|---------------------------------------|--|-----------------------|
| List Names in Bowling Order | Sex M/F | TNBA Cert No | USBC Cert No | Birthdate (mm/dd/yyyy) | Age as of 8/1/2016 | AVG as of 2/28/2017 (21+ games) | Official Use Only Doubles DIV / HDCP | Singles DIV / HDCP |
| 1. | | | | | | | | |
| 2. | | | | | | | | |

| | | | | | | | | |
|----|--|--|--|--|--|--|--|--|
| 1. | | | | | | | | |
| 2. | | | | | | | | |

TOTAL ENTRY FEE PER PERSON: \$30.00 (Only remit \$15 per person with entry form)

Senate _____ Coach _____ Email _____

Telephone Number: () _____ Address _____ City/State/Zip _____