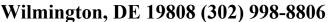




Registration Form

65[™] Annual TNBA Eastern Regional Tournament

November 14-16, 2022 Bowlero Wilmington 3215 Kirkwood Hwy



Additional Information: www.tnbainc.org



Teams

| Captain's (Submitter's) Name | Senate Repre | sented |
|------------------------------|--------------------|-------------|
| Address | | |
| City | State | Zip |
| Email | Email confirmation | Telephone # |

THERE WILL BE ONE SQUAD ON FRIDAY AY 6:00 p.m.

CAPTAIN/SUBMITTER WILL RECEIVE ALL CONFIRMATIONS, CORRESPONDENCE & AWARDS

Submitter certifies the correctness of the submitted entry(s), makes application to enter the Tournament on behalf of the team members and agrees that team members will abide by all the Tournament rules and regulations. (Please refer to Tournament rules)

| Entry Fee Breakdown | Teams | Senior Teams | Doubles | Singles | Mixed Doubles | All Events |
|------------------------|--------|-----------------|---------|---------|------------------|---------------|
| Prize fund | 140.00 | 112.00 | 56.00 | 28.00 | 56.00 | 4.00 |
| Bowling Fee & Expenses | 110.00 | 88.00 | 44.00 | 22.00 | 44.00 | 1.00 |
| Total | 250.00 | 200.00 | 100.00 | 50.00 | 100.00 | 5.00 |
| | | | | | | |

Entry Fee: \$50.00 per person per event

Optional All-Events: Handicap and Scratch Divisions ~ \$5.00 per division

Optional Scratch Team Special: \$50.00 per team

Cancellations/Changes and Refunds: Fees will be refunded if cancellation or change resulting in a refund is received in writing no later than October 17, 2025. After that date, fees are non-refundable. Any entry missing required information or accompanied by an improper amount of fees may be returned to the sender at the discretion of the tournament director. Substitutions are allowed at no charge. Total entry fee **MUST** accompany the entry form. **There will be no partial payments.**

| PLEASE COMPLETE: | Indicate Number Submitted (THIS FORM): | TEAMS | SCRATCH TEAMS |
|------------------|--|-------|---|
| | TOTAL AMOUNT DUE (THIS FORM): \$_ | | (\$250 x no. of Teams + \$50 X no. of Scratch |

PAYMENT METHOD: Certified Check or Money Order must be in U.S. funds payable to: **TNBA Eastern Regional Tournament Fund.** Personal checks will not be accepted. Registration confirmation/receipt and further information will be mailed (or emailed upon request).

Please mail completed registration form with full payment to:

Janeen Morgan, Director TNBA Eastern Regional Tournament P.O. Box 303, Sykesville, MD 21784

Phone: 443-570-7536 Email: tnbaert@gmail.com

| FOR ERT USE ONLY |
|--|
| DATE RECEIVED: |
| DATE PAYMENT RECEIVED: PAYMENT AMOUNT RECEIVED: \$ |
| CONFIRMATION NO CONFIRMATION DATE: EMAILED |

TNBA EASTERN REGIONAL TOURNAMENT

| TEAM NAME TEAM TYPE: TEAM NAME TEAM TYPE: | MEN TEAM BOWLER NAME | | TEAM MIXED TNBA# (REQUIRED) TEAM MIXE TNBA# (REQUIRED) | USBC# | M/F M/F | 2024-25 HI AVG | TOUR ENTRY # | |
|--|--|-----------|---|--------------------|--|-------------------|------------------|--|
| TEAM NAME | MEN TEAM BOWLER NAME (REQUIRED): MEN TEAM | | TNBA# (REQUIRED) TEAM MIXE | USBC# D TEAM SCRA | M/F | 2024-25 HI AVG | TOUR ENTRY # | 7:00 am |
| | MEN TEAM | ○ WOMEN'S | TNBA# | | | 2024-25 | TOUR ENTRY # | 7:00 am 7:00 a |
| | MEN TEAM | ○ WOMEN'S | TNBA# | | | 2024-25 | 11 11 11 11 TOUR | 7:00 am 715 12:30 pm 716 6:00 pm |
| | MEN TEAM | ○ WOMEN'S | TNBA# | | | 2024-25 | 11 11 11 11 TOUR | 7:00 am 715 12:30 pm 716 6:00 pm |
| | MEN TEAM | ○ WOMEN'S | TNBA# | | | 2024-25 | 11 | /14 7:00 am /15 12:30 pm /16 6:00 pm |
| | MEN TEAM | ○ WOMEN'S | TNBA# | | | 2024-25 | 11 | /14 7:00 am /15 12:30 pm |
| | | ○ WOMEN'S | TEAM MIXED |) TEAM SCRA | ТСН ТЕА | AM 🗆 | | |
| TEANANIAN A | (DEOLUBED). | | | | | | PREEERRE | DDATET PRESENTIME |
| | | | i i | 1 | | | | / : |
| | | | | | | | | |
| | | | | | ullet | | ENTRY # | ASSIGNED SQUAD |
| | | | | | | | TOUR | NAMENT USE ONLY |
| | BOWLER NAME | | (REQUIRED) | USBC# | M/F | HI AVG | 11/ | |
| ТЕАМ ТҮРЕ: | ○ MEN'S TEAM | ○ WOMEN'S | TEAM MIXE | | ТСН ТЕА | 2024-25 | 11/ | |
| TEAM NAME | (REQUIRED): | | | | | | PREEERRE 11/ | |
| | | | | | | | | /: |
| | | | | | | | ENTRY # | ASSIGNED SQUAD |
| | | | | | | | TOUR | NAMENT USE ONLY |
| | BOWLER NAME | | (REQUIRED) | USBC# | M/F | HI AVG | | /16 6:00 pm |
| TEAM TYPE: | MEN'S TEAM | O WOMEN'S | TEAM MIXED | | TCH TEA | 2024-25 | 11 | /15 12:30 pm |
| TEAM NAME | | ^ | harves | | |] | | DDATE PREFERRED TIME — /14 7:00 a m |
| | | | | | _ | | | |
| | | | | | | | LIVIIXI # | ASSIGNED SQUAD |
| | | | | | +- | | ENTRY # | ASSIGNED SQUAD |
| | | | (IIII QOIIII D) | | | | | /16 6:00 pm |
| | BOWLER NAME | | TNBA# (REQUIRED) | USBC# | M/F | 2024-25 HI AVG | 11 | /15 12:30 pm |
| TEAM TYPE: | MEN'S TEAM | ○ WOMEN'S | TEAM () MIXE | D TEAM SCRA | TCH TEA | am \square | 11 | /14 7:00 a m |
| <u> </u> | (DECLUBED). | | Register | the following | ર team | s: | ┌─ PŖĔĔŖŔĔ | |
| TEAM NAME | | | | | | | | |