



# 47th Annual Southern Regional Tournament

## TEAM EVENT

CERTIFIED BY TNBA AND USBC

THURSDAY, FRIDAY, SATURDAY, SUNDAY NOVEMBER 19-22, 2026



**ENTRIES CLOSE 11.01.2026**

**ENTRY FEE: \$250.00 PER TEAM**

**HANDICAP 90% OF 220**

<b>Select One:</b> <input type="checkbox"/> <b>MEN</b> <input type="checkbox"/> <b>WOMEN</b> <input type="checkbox"/> <b>MIXED TEAM</b>					
Thu	Nov 19	Sweeper	<input type="checkbox"/> 12:30pm	<input type="checkbox"/> 5:30pm	BOS
Fri	Nov 20	<input type="checkbox"/> 7:30am	<input type="checkbox"/> 12:30pm	<input type="checkbox"/> 5:30pm	<input type="checkbox"/> 9:30pm
Sat	Nov 21	<input type="checkbox"/> 7:30am	<input type="checkbox"/> 12:30pm	<input type="checkbox"/> 5:30pm	<input type="checkbox"/> 9:30pm
Sun	Nov 22	<input type="checkbox"/> 7:30am	<input type="checkbox"/> 12:30pm		
<b>2nd Choice:</b> _____					

**Astro Super Bowl**  
 3203 Harry Wurzbach Rd.  
 San Antonio, TX 78209  
 (210) 824-6348



<b>CODE:</b>	
DATE REC'D	AMOUNT REC'D

**TEAM NAME:** \_\_\_\_\_

**SENATE** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_

(PLEASE TYPE OR PRINT)

(PLEASE TYPE OR PRINT)

TNBA #	USBC #	Bowler's Name	Sex F M	2025/26 Highest Average	SCRATCH TEAM \$50	Jersey Shirt Size

I/We hereby certify the correctness of the above entry and agree to abide by all Tournament Rules.

(Signature of Captain): \_\_\_\_\_

Address: \_\_\_\_\_

(Print Captain's Name): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Verified By: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

**MAKE CERTIFIED CHECKS OR MONEY ORDERS PAYABLE TO: THE NATIONAL BOWLING ASSOCIATION**

MAIL ENTRY TO: Anetrice E. Kornbluth, Tournament Director P.O. BOX 552613 MIAMI GARDENS, FL 33055 Telephone: (305) 632-0027

Or Email to: [tnbasrt@tnbainc.org](mailto:tnbasrt@tnbainc.org) and make payment thru Zelle to: [tnbasrt@tnbainc.org](mailto:tnbasrt@tnbainc.org)