

<b>DO NOT WRITE BELOW</b>	
ENTRY NO. _____	
AMOUNT REC'D	DATE REC'D
\$ _____	_____

**NCAUSBCA - 52nd ANNUAL YOUTH CHAMPIONSHIP TOURNAMENT - FEBRUARY/MARCH 2015**

**Bowl America Falls Church 140 South Maple Avenue, Falls Church, VA 22046 (703) 534-1370**

PER BOWLER	TEAM	SINGLES	DOUBLES	BUMPER	HDCP ALL EVENTS	SCR ALL EVENTS
BOWLING FEE:	\$ 9.75	\$ 9.75	\$ 9.75	\$ 6.50	\$ -	\$ -
SCHOLARSHIPS:	\$ 10.75	\$ 10.75	\$ 10.75	\$ 9.00	\$ 4.00	\$ 9.00
EXPENSES:	\$ 4.00	\$ 4.00	\$ 4.00	\$ 4.00	\$ 1.00	\$ 1.00
SCHOLARSHIP FUNDS:	\$ 0.50	\$ 0.50	\$ 0.50	\$ 0.50	\$ -	\$ -
TOTAL Per Bowler	\$ 25.00	\$ 25.00	\$ 25.00	\$ 20.00	\$ 5.00	\$ 10.00

**USBC CERTIFICATION # 08115 & 08415**  
**SMART ACCOUNT # 9559**

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

\*\*\* YOUR BOWLING CENTER: \_\_\_\_\_

TEAM	SAT - FEB 28 or MAR 7 SUN - MAR 1 or MAR 8 TIMES - 10AM or 2PM SELECT DATE & TIME 1. DATE _____ TIME _____ 2. DATE _____ TIME _____ 3. DATE _____ TIME _____	TEAM <i>Please print names</i>		BOWLER ID NUMBER	AVERAGE <i>as of 12/17</i>	Leave BLANK	M / F	AGE	High School GRAD YEAR	ENTRY FEES
		LAST	FIRST							
		1. _____	1. _____	1. _____	1. _____	_____	1. _____	1. _____	1. _____	\$25 <i>per bowler</i>
		2. _____	2. _____	2. _____	2. _____	_____	2. _____	2. _____	2. _____	\$100 total <i>per team</i>
		3. _____	3. _____	3. _____	3. _____	_____	3. _____	3. _____	3. _____	
		4. _____	4. _____	4. _____	4. _____	_____	4. _____	4. _____	4. _____	

DOUBLES SINGLES	SAT - FEB 28 or MAR 7 SUN - MAR 1 or MAR 8 TIMES - 10AM or 2PM SELECT DATE & TIME 1. DATE _____ TIME _____ 2. DATE _____ TIME _____ 3. DATE _____ TIME _____	DOUBLES/SINGLES <i>Please print names</i>		BOWLER ID NUMBER	AVERAGE <i>as of 12/17</i>	Leave BLANK	M / F	AGE	High School GRAD YEAR	ENTRY FEES
		LAST	FIRST							
		1. _____	1. _____	1. _____	1. _____	_____	1. _____	1. _____	1. _____	\$50 <i>per bowler</i>
		2. _____	2. _____	2. _____	2. _____	_____	2. _____	2. _____	2. _____	\$100 total <i>per pair</i>
		1. _____	1. _____	1. _____	1. _____	_____	1. _____	1. _____	1. _____	
		2. _____	2. _____	2. _____	2. _____	_____	2. _____	2. _____	2. _____	

**PLEASE NOTE: BOWLER MUST BOWL ALL THREE EVENTS (TEAM, DOUBLES, & SINGLES) TO QUALIFY FOR ALL EVENTS**

HANDICAP ALL EVENTS	HDCP ALL EVENTS <i>Please print names</i>		BOWLER ID NUMBER	ENTRY FEES	SCRATCH ALL EVENTS	SCR ALL EVENTS <i>Please print names</i>		BOWLER ID NUMBER	ENTRY FEES
	LAST	FIRST				LAST	FIRST		
	1. _____	1. _____	1. _____	\$5 <i>per bowler</i>		1. _____	1. _____	1. _____	\$10 <i>per bowler</i>
	2. _____	2. _____	2. _____			2. _____	2. _____	2. _____	
	3. _____	3. _____	3. _____			3. _____	3. _____	3. _____	
	4. _____	4. _____	4. _____			4. _____	4. _____	4. _____	

BUMPER SINGLES	SELECT DATE & TIME <i>same options as above</i> 1. DATE _____ TIME _____ 2. DATE _____ TIME _____ 3. DATE _____ TIME _____	BUMPER SINGLES <i>Please print names</i>		BOWLER ID NUMBER	AVERAGE <i>as of 12/17</i>	Leave BLANK	M / F	AGE	High School GRAD YEAR	ENTRY FEES
		LAST	FIRST							
		1. _____	1. _____	1. _____	1. _____	_____	1. _____	1. _____	1. _____	\$20 <i>per bowler</i>
		2. _____	2. _____	2. _____	2. _____	_____	2. _____	2. _____	2. _____	

**Mail Entries To:** Diane Frelke - NCAUSBCA Tournament  
 9921 Arrowood Dr.  
 Manassas, VA 20111

*Please DO NOT SEND via "Signature Required" mail*

**ENTRY POSTMARKED BY DATE:** February 7, 2015

**\*Required - COACHES ONLY - complete this section**

COACH'S NAME: _____	BOWLING CENTER: _____
ADDRESS: _____	
CITY _____	STATE _____ ZIP _____
HOME PHONE: _____	WORK PHONE: _____
EMAIL ADDRESS: _____	
COACH'S SIGNATURE (required): _____	