

For Center Use Only

Bowler Interested in Fall/Summer League? Yes ___ No ___ Maybe ___

Dates Contacted: _____

Bowler Returning to This League Next Year? Yes ___ No ___ Maybe ___

Dates Contracted: _____

Additional League(s) _____

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Team Registration Card

Please Print

Team Name _____ Team # _____

League Name _____

(List Bowlers in order of intended line-up, i.e., Lead-off first, Anchor last)

Bowler #1 _____ Female

Male

Address _____

City _____ State _____ Zip _____

Email _____ Primary Phone # _____

Place of Employment _____

Bowler #2 _____ Female

Male

Address _____

City _____ State _____ Zip _____

Email _____ Primary Phone # _____

Place of Employment _____

Bowler #3 _____ Female

Male

Address _____

City _____ State _____ Zip _____

Email _____ Primary Phone # _____

Place of Employment _____

Bowler #4 _____ Female

Male

Address _____

City _____ State _____ Zip _____

Email _____ Primary Phone # _____

Place of Employment _____

Bowler #5 _____ Female

Male

Address _____

City _____ State _____ Zip _____

Email _____ Primary Phone # _____

Place of Employment _____