Australian Junior National Tenpin Bowling Championship PLAYER REGISTRATION FORM

	ENTRIES RECEIVED WITHOUT PAYMENT WILL NOT BE PROCESSED
	DRESSES (ALL INFORMATION TO BE COMPLETED) TBA Registered Player Number:
	x () Mobile:
	PC:
	TO
	Signature
Please provide FULL	information and address details for all
BOWLER 1 - General Information	This will be my year in the Australian Junior Championship
Name:	TBA Registered Player Number:
Address:	PC:
Please circle Male / Female Age: DOB:	
	Association / Centre:
Visiting bowler will be staying in t	the Host City from/ to/
BOWLER 2 - General Information	This will be my year in the Australian Junior Championship
Name:	TBA Registered Player Number:
Address:	PC:
Please circle Male / Female Age: DOB:	
Phone: (Home or mobile) ()	Association / Centre:
Visiting bowler will be staying in t	the Host City from/ to/
BOWLER 3 General Information	This will be my year in the Australian Junior Championship
Name:	TBA Registered Player Number:
Address:	PC:
Please circle Male / Female Age: DOB:	/ / Average:
	Association / Centre:
Visiting bowler will be staying in t	the Host City from/ to/
BOWLER 4 General Information	This will be my year in the Australian Junior Championship
Name:	TBA Registered Player Number:
Address:	PC:
Please circle Male / Female Age: DOB:	/ Average:
Phone: (Home or mobile) ()	Association / Centre:
Visiting bowler will be staying in t	the Host City from/ to/
BOWLER 5 General Information	This will be my year in the Australian Junior Championship
Name:	TBA Registered Player Number:
	PC:
Please circle Male / Female Age: DOB:	/ Average:
Phone: (Home or mobile) ()	Association / Centre:
Visiting bowler will be staying in t	the Host City from/ to/

Please photocopy this form if extra space is needed for participant's details

AUSTRALIAN JUNIOR NATIONAL CHAMPIONSHIP ENTRY FORM

TEAM ENTRY		ENTRY No.								
TEAM NAME:		(Circle Male (M) Female (F) or Mixed Entry)								
Office Use Only	FULL NAME	M / F Mixed	Highest Avg	TEAM SQUAD TIMES						
					Date	Time				
				Pref 1						
				Pref 2						
				TOTAL ENTRY COST \$140						
				AMOUNT REMITTED \$						
GRADE:	TEAM	AVERAGE:								

DOUBLES ENTRY

Qual M/F High **Office Use** FULL NAME DOUBLES SQUAD TIMES Mixed Only ifier Avg Date Time Pref 1 GRADE: **TEAM AVERAGE:** Pref 2 I wish to nominate this MIXED DOUBLE entry to be used for qualifying in: JUNIOR SCOTCH DOUBLES 📮 \$10.00 per event each OR this DOUBLE entry to be used for qualifying in: MASTERS CLASSIC CUP RESTRICTED CUP S10.00 per event TOTAL ENTRY COST \$56 **AMOUNT REMITTED \$**

ENTRY No.

SINGLES ENTRY

ENTRY No. **Office Use** Highest M/F FULL NAME SINGLES SQUAD TIMES Only Avg Date Time I wish to nominate this single entry to be used for qualifying in: Pref 1 RESTRICTED AMOUNT REMITTED **GRADE:** Pref 2

ALL EVENTS ENTRIES: \$6.00

FULL NAME	M/F	Highest Avg	Amount Remitted	ENTRY No.		ENTRY FEES
					EVENT	CASH / CHEQUE / CREDIT CARD
					Teams	\$140
					Doubles	\$56
					Singles	\$28

Please make cheques payable to: TBA Tournament Account

CARDHOLDER'S INFORMATION - Please debit the amount of \$								
[]	Mastercard	Cardholder's name:						
[]	Bankcard	Cardholder's signature:						
[]	Visa	Card exp/ Transaction Date://						
Care	d No							

ALL ENTRY FORMS TOGETHER WITH FEES, MUST BE FORWARDED TO

TENPIN BOWLING AUSTRALIA TOURNAMENT TEAM, PO Box 181, Patterson Lakes, Victoria 3197 or Fax: 03 9772 0578

All enquiries regarding squad times and changes should be directed to

TENPIN BOWLING AUSTRALIA LIMITED P.O. Box 1518, Oxenford, Queensland 4210 Tel : (07) 5580 3551, Fax : (07) 5580 3558 Email: tenpin.bowling@tenpin.org.au

2006 AUSTRALIAN JUNIOR NATIONAL CHAMPIONSHIP ENTRY FORM ADDITIONAL EVENTS ENTRY FORM

SINGLES ENTH	RY			ENTRY	Vo.		
Office Use Only	FULL NAME	M / F	Highest Avg	SING	SINGLES SQUAD TIMES		
					Date	Time	
I wish to nominate	e this single entry to be used for qualifying RESTRICTED D OPEN MASTERS	-	oer event	Pref 1			
AMOUNT REM	ITTED \$ GRADE	:		Pref 2			
SINGLES ENTRY					Vo.		
Office Use Only	FULL NAME	M / F	Highest Avg	SING	GLES SQUAD	TIMES	
					Date	Time	
I wish to nominate this single entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS S10.00 per event							
AMOUNT REM	ITTED \$ GRADE:			Pref 2			
SINGLES ENTH	RY	ENTRY No.					
Office Use Only	FULL NAME	M / F	Highest Avg	SINGLES SQUAD TIMES			
					Date	Time	
I wish to nominate	e this single entry to be used for qualifying RESTRICTED DOPEN MASTERS	-	oer event	Pref 1			
AMOUNT REM	ITTED \$ GRA	DE		Pref 2			
SINGLES ENTH	RY			ENTRY	Vo.		
Office Use Only	FULL NAME	M / F	Highest Avg	SING	GLES SQUAD	TIMES	
					Date	Time	
I wish to nominate	e this single entry to be used for qualifying RESTRICTED DOPEN MASTERS	-	oer event	Pref 1			
AMOUNT REM	ITTED \$ GRA	DE		Pref 2			
SINGLES ENTI	۲Y			ENTRY	Vo.		
Office Use Only	FULL NAME	M / F	Highest Avg				
					Date	Time	
I wish to nominate this single entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS S10.00 per event				Pref 1			
AMOUNT REM	ITTED \$ GRA	DE		Pref 2			

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DOUBLES ENTRY

ENTRY No.

Office Use Only	FULL NAME	M / F Mixed	Highest Avg	DOUBLES SQUAD TI		TIMES
					Date	Time
				Pref 1		
GRADE:	TEAM	AVERAGE:		Pref 2		
I wish to nominate this MIXED DOUBLE entry to be used for qualifying in: JUNIOR SCOTCH DOUBLES 🔲 \$10.00 per event each						
TOTAL ENTRY COST \$56 AMOUNT REMITTED \$						
DOUBLES ENTRY ENTRY No.						

DOUBLES ENTRY

Office Use Only	FULL NAME	Qual ifier	M / F Mixed	High Avg	DOU	BLES SQUAD	TIMES
						Date	Time
					Pref 1		
GRADE:	TEA	M AVE	RAGE:		Pref 2		
I wish to nominate this MIXED DOUBLE entry to be used for qualifying in: JUNIOR SCOTCH DOUBLES S10.00 per event each OR this DOUBLE entry to be used for qualifying in: MASTERS CLASSIC CUP RESTRICTED CUP \$10.00 per event							
TOTAL ENTRY	COST \$56 AMOU) \$			

DOUBLES ENTRY

Office Use Only	FULL NAME	Qual ifier	M / F Mixed	High Avg	DOUBLES SQUAD TIMES		
						Date	Time
					Pref 1		
GRADE:	TEA	M AVE	RAGE:		Pref 2		
I wish to nominate this MIXED DOUBLE entry to be used for qualifying in: JUNIOR SCOTCH DOUBLES S10.00 per event each OR this DOUBLE entry to be used for qualifying in: MASTERS CLASSIC CUP RESTRICTED CUP \$10.00 per event							
TOTAL ENTRY	COST \$56 AMOU		MITTER) \$			

TEAM ENTRY

ENTRY No.

ENTRY No.

TEAM NAME:		(Circle Male (M) Female (F) or Mixed Entry)						
Office Use Only	FULL NAME	M / F Mixed	Highest Avg	TEAM SQUAD TIMES				
					Date	Time		
				Pref 1				
				Pref 2				
				TOTAL ENTRY COST		\$140		
				AMOUN	T REMITTED	\$		
GRADE:	TEAM A	VERAGE:						

ALL ENTRY FORMS TOGETHER WITH FEES, MUST BE FORWARDED TO TENPIN BOWLING AUSTRALIA TOURNAMENT TEAM, PO Box 181, Patterson Lakes, Vic 3197 Fax: 03 9772 0578

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