2009 PARTICIPANT REGISTRATION FORM

SPECIAL NOTE - Confirmation will NOT be supplied unless requested. Where confirmation of competitors in the same group are to be sent to a SPECIFIC person, please provide relevant contact										
where confirm details.	iation of competitors in th	e same group are to be sent to a SPECI	iric person, piease provide relevant contact							
	ame: Phone: (Home or mobile) ()									
Facsimile:		Email:								
BOWLER 1	This will be my	year in the Championships	Date of Birth:/							
Name:			TBA Player Registration No:							
Address:			Post Code:							
Please circle Ma	ale / Female Average:	Phone No.: (Home	or mobile) ()							
Email:		Association/Centre:								
Facsimile No		I will be staying in the a	area from/09 to/09							
BOWLER 2	This will be my	year in the Championships	Date of Birth:/							
Name:			TBA Player Registration No:							
Address:			Post Code:							
Please circle Ma	ale / Female Average:	Phone No.: (Home	or mobile) ()							
Email:		Association/Centre:								
Facsimile No		I will be staying in the a	rea from09 to09							
BOWLER 3	This will be my	year in the Championships	Date of Birth:/							
Name:			TBA Player Registration No:							
Address:			Post Code:							
Please circle Ma	ale / Female Average:	Phone No.: (Home	or mobile) ()							
Email:		Association/Centre:								
Facsimile No. ₋		I will be staying in the a	rea from/09 to/09							
BOWLER 4	This will be my	year in the Championships	Date of Birth://							
Name:			TBA Player Registration No:							
Address:			Post Code:							
Please circle M	ale / Female Average:	Phone No.: (Home	or mobile) ()							
Email:		Association/Centre:								
Facsimile No		I will be staying in the a	rea from/09 to/09							
BOWLER 5	This will be my	year in the Championships	Date of Birth:/							
Name:			TBA Player Registration No:							
Address:			Post Code:							
		Phone No.: (Home	or mobile) ()							
		·	rea from/09 to/09							

NOTE: All results will be published on the web Site unless TBA are advised a bowler does not wish have their name published

ALL ENTRY FORMS TOGETHER WITH FEES, MUST BE FORWARDED TO TENPIN BOWLING AUSTRALIA TOURNAMENT TEAM, PO Box 244, Albion, Queensland, 4010

All enquiries regarding squad times and changes should be directed to DENECE JONES - Ph (03) 5823 1841 Fax (03) 5823 1841, Email: denece@bigpond.net.au

	2009 AUSTRALIAN	INATION	NAL C	ПА	MIPIONS	HIF ENI	KITOKW	
TEAMS EI	NTRY	ADULT	&		SENIOF	RS &	ENTRY No.	
TEM NAME			MALE	&	FEM <i>A</i>	ALE &	MIXED &	
Office Use	Full Na	mes			Highest Average	TE	MES	
							Date	Time
						Pref 1		
						Pref 2		
						TOTAL EN	TRY COST \$1	50
						AMOUNT R	REMITTED \$	
GRADE:		TOTA	AL AVER	AGE				
DOUBLES	ENTRY	ADULT	&		SENIOF	RS &	ENTRY No.	
			MALE	&	FEMA	LE &	MIXED &	
Office Use	Full Na	mes			Highest	DOU	BLES SQUAD T	IMES
					Average		Date	Time
						Pref 1		
						Pref 2		
Qualifying fe will be accep	ees for Restricted Cup, Seniors (oted.	Cup, Classic	Cup and	Mast	ers must be	paid at squad	Check In. No pr	e paid fees
AMOUNT R	EMITTED: \$				GRAD	E:		
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			MALE	&	FEM <i>A</i>	ALE &		
Office Use	Full Nar	mes			Highest	SIN	GLES SQUAD T	IMES
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	ees for Restricted Cup, Seniors of the Check In. No pre paid fees wi			Mast	ers must be	Pref 2		
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ALL EVEN	ITS ENTRY							
Office use	Full Name		M/F		ghest erage Gra	de Amount	Adult or Senior	Entry Number
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	All cheques to be mad	e payable to	Tenpin	Bowli	ing Australia	Tournamen	t Account	
CARDHO	LDER'S INFORMATION - F	Please debi	t the am	oun	t of \$			
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[] Vis	a Card ex	rp/_		Т	ransaction	Date:/	<u> </u>	
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2009 AUSTRALIAN NATIONAL CHAMPIONSHIP ENTRY FORM **TEAMS ENTRY ADULT SENIORS ENTRY No.** & TEM NAME: MALE & FEMALE **MIXED** & Highest **TEAM SQUAD TIMES** Office Use **Full Names** Average Time **Date** Pref 1 Pref 2 **TOTAL ENTRY COST** \$150 **AMOUNT REMITTED** \$ GRADE: **TOTAL AVERAGE TEAMS ENTRY ADULT SENIORS ENTRY No.** & & TEM NAME: MALE & **FEMALE** & **MIXED** & Highest **TEAM SQUAD TIMES** Office Use **Full Names** Average **Date** Time Pref 1 Pref 2 \$150 TOTAL ENTRY COST AMOUNT REMITTED **GRADE: TOTAL AVERAGE TEAMS ENTRY ADULT SENIORS ENTRY No.** TEM NAME: MALE & **FEMALE** & **MIXED** & Highest **TEAM SQUAD TIMES** Office Use **Full Names Average Date** Time Pref 1 Pref 2 **TOTAL ENTRY COST** \$150 AMOUNT REMITTED GRADE: **TOTAL AVERAGE Teams Doubles** Singles **All Events ENTRY FEES** \$150.00 \$60.00 \$30.00 \$6.00 PAYMENT OPTIONS: [] CASH, [] CHEQUE, [] CREDIT CARD or EFT CARDHOLDER'S INFORMATION - Please debit the amount of \$ [] Mastercard Cardholder's name: [] Visa

Card No. ___ ____

2009 AUSTRALIAN NATIONAL CHAMPIONSHIP ENTRY FORM

DOUBLES	ENTRY	ADULT	&		SENIOR	RS &	ı	ENTRY N	Ο.	
			MALE	&	FEMA	LE &		MIXED &		
Office Use	Fu	II Names			Highest	ı	DOUE	BLES SQUAD TIMES		
					Average			Date	Time	
						Pref 1				
						Pref 2				
Qualifying fe will be accep	es for Restricted Cup, Ser ted.	iors Cup, Classic	Cup and	Maste	ers must be p	paid at s	quad	Check In. N	o pr	e paid fees
AMOUNT R	EMITTED: \$				GRAD	E:				
DOUBLES	ENTRY	ADULT	&		SENIORS & ENTRY No.					
			MALE	&	FEM <i>A</i>	ALE 6	&	MIXED	&	
Office Use	Fu	III Names			Highest		DOUE	BLES SQUA	AD 1	TIMES
					Average			Date	Time	
						Pref 1				
						Pref 2				
Qualifying fe will be accep	es for Restricted Cup, Ser oted.	niors Cup, Classic	Cup and	d Mast	ers must be	paid at s	quad	Check In. N	lo p	re paid fees
AMOUNT REMITTED: \$			GRADE:							
DOUBLES	DOUBLES ENTRY ADULT & SENIORS &		k	ENTRY N	lo.					
			MALE	&	FEMA	ALE &	&	MIXED	&	
Office Use	Fu	III Names			Highest		DOUE	BLES SQUA	4D 1	IMES
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Qualifying fe will be accept	es for Restricted Cup, Ser ted.	niors Cup, Classic	Cup and	l Maste	ers must be	paid at s	quad	Check In. N	lo pi	e paid fees
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DOUBLES	ENTRY	ADULT	&		SENIOR	RS &		ENTRY N	0.	
			MALE	&	FEMA	LE 8	<u> </u>	MIXED	&	
Office Use	e Use Full Names				Highest Average	I	DOUE	BLES SQUAD TIMES		
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Qualifying fe will be accep	es for Restricted Cup, Sen ted.	iors Cup, Classic	Cup and	Maste	ers must be p	paid at s	quad	Check In. N	o pr	e paid fees
AMOUNT RI	EMITTED: \$				GRAD	E:				
			Tean	n	Doub	les	S	ingles		II Events

\$150.00

CASH/CHEQUE/

CREDIT CARD

ENTRY FEES

\$60.00

ALL CHEQUES TO BE MADE PAYABLE TO TENPIN BOWLING AUSTRALIA TOURNAMENT ACCOUNT

\$30.00

\$6.00

2009 AUSTRALIAN NATIONAL CHAMPIONSHIP ENTRY FORM SINGLES ENTRY **ADULT** & **SENIORS** & **ENTRY No.** & MALE & **FEMALE** Office Use Highest **SINGLES SQUAD TIMES Full Names Average Date** Time Pref 1 Qualifying fees for Restricted Cup, Seniors Cup, Classic Cup and Masters must be Pref 2 paid at squad Check In. No pre paid fees will be accepted. AMOUNT REMITTED: \$ **GRADE:** SINGLES ENTRY **ADULT SENIORS** & **ENTRY No.** MALE & **FEMALE** & Highest **SINGLES SQUAD TIMES** Office Use **Full Names Average** Date Time Pref 1 Qualifying fees for Restricted Cup, Seniors Cup, Classic Cup and Masters must be Pref 2 paid at squad Check In. No pre paid fees will be accepted. AMOUNT REMITTED: \$ **GRADE:** SINGLES ENTRY **ADULT SENIORS** & & **ENTRY No.** MALE & **FEMALE** & Office Use Highest **SINGLES SQUAD TIMES Full Names Average** Date Time Pref 1 Qualifying fees for Restricted Cup, Seniors Cup, Classic Cup and Masters must be Pref 2 paid at squad Check In. No pre paid fees will be accepted. AMOUNT REMITTED: \$ **GRADE:** SINGLES ENTRY ADIII T SENIODS ENTDV No

SINGLES	ENIRY ADULI &		SENIOR	> &	ENIRY NO.				
	MALE	FEMAL	.E &						
Office Use	Full Names		Highest	SINGLES SQUAD TIMES					
			Average		Date	Time			
				Pref 1					
	es for Restricted Cup, Seniors Cup, Classic Cup and d Check In. No pre paid fees will be accepted.	ters must be	Pref 2						
AMOUNT R	EMITTED: \$ GRADE:								

ALL EVENTS ENTRY

Office use	Full Name	M/F	Highest Average	Grade	Amount		Adult or Senior				Entry Number
						Α	&	S	&		
						Α	&	S	&		
						Α	&	S	&		
						Α	&	S	&		
						Α	&	S	&		