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**EXECUTIVES 5 PIN CHAMPIONSHIPS  
 ZONE/DC ASSOCIATION ENTRY FORM**

**This form MUST be completed and returned to the Provincial Office no later than **JANUARY 20, 2017**. Please return this form along with your payment for entry fee (\$37.29) and guest luncheon tickets (if applicable) prior to the deadline date.**

Zone/Decentralized Association: \_\_\_\_\_

Position Held within Zone/DC Association: \_\_\_\_\_

**(Note: Executive Listing must be filed with the Provincial Office and will be verified)**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: {    } \_\_\_\_\_ Membership No.: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**AVERAGE CLARIFICATION**

Rolling Average as recorded in the Average Book/O5PBA Website: \_\_\_\_\_

Do you bowl in any leagues not included in the rolling average above?    (    ) Yes    (    ) No

If <b>YES</b> please list the league(s) below and indicate type of membership in said league(s):	Membership Type	Not a Member

**Please Note: If you are bowling in any league(s) that are not included in the rolling average above please submit copies of your individual average sheet(s) from last year (2015-16) with this form.**

I am aware of the rules and regulations of 5 pin bowling and to the best of my knowledge, I declare the information contained on the form to be true and accurate. Please sign below acknowledging that you have read and provided all the information required.

\_\_\_\_\_ Member's Signature

\_\_\_\_\_ Date

Bowler's highest league average up to and including JANUARY 8, 2017:  
(Enclose a copy of all individual average sheet(s) if you are not listed with a rolling average on the website)

**LUNCHEON INFORMATION**

To be held on Saturday after bowling at Sherwood Centre in the Kegler's Lounge. Bowlers are **FREE OF CHARGE**. All guest tickets are \$10.00 (HST included).

Will you be attending the Luncheon?            Yes { }    No { }

Number of **GUEST TICKETS ONLY** you are ordering: \_\_\_\_\_

**FINANCE SUMMARY**

Zone/DC Association Entry Fee:	\$ <u>37.29</u>
Guest Luncheon Tickets: _____ @ \$10.00 each =	\$ _____
<b>GRAND TOTAL:</b>	<b>\$ _____</b>

**METHOD OF PAYMENT**

Please Indicate:    Cheque { }    Money Order { }    \*\* VISA { }    \*\* Mastercard { }

**\*\* NOTE: IF YOU ARE PAYING BY CREDIT CARD, YOUR PAYMENT WILL BE PROCESSED TO YOUR CREDIT CARD ON THE DATE WE RECEIVE THIS BOWLER INFORMATION FORM**

Cardholder's Name: \_\_\_\_\_  
(PLEASE PRINT)

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_  
(APPROVAL FOR PAYMENT BY CREDIT CARD)