2006 PARTICIPANT REGISTRATION FORM

| SPECIAL NOTE: Confirmation will NOT be | supplied unless requested. roup are to be sent to a SPECIFIC person, please provide relevant contact |
|--|---|
| details. | |
| | Phone: (Home or mobile) () |
| Address: | Post Code Email: |
| | Linan |
| BOWLER 1 This will be my year in t | he Championships |
| Name: | TBA Player Registration No: |
| Address: | Post Code: |
| Please circle Male / Female Average: | Phone No.: (Home or mobile) () |
| Email: | Association/Centre: |
| Facsimile No. | I will be staying in Hobart from06 to06 |
| BOWLER 2 This will be my year in t | he Championships |
| Name: | TBA Player Registration No: |
| Address: | Post Code: |
| Please circle Male / Female Average: | Phone No.: (Home or mobile) () |
| Email: | Association/Centre: |
| Facsimile No | I will be staying in Hobart from/06 to/06 |
| BOWLER 3 This will be my year in t | he Championships |
| Name: | TBA Player Registration No: |
| Address: | Post Code: |
| Please circle Male / Female Average: | Phone No.: (Home or mobile) () |
| Email: | Association/Centre: |
| Facsimile No | I will be staying in Hobart from/06 to/06 |
| BOWLER 4 This will be my year in t | he Championships |
| Name: | TBA Player Registration No: |
| Address: | Post Code: |
| Please circle Male / Female Average: | Phone No.: (Home or mobile) () |
| Email: | Association/Centre: |
| Facsimile No | I will be staying in Hobart from/06 to/06 |
| BOWLER 5 This will be my year in t | he Championships |
| Name: | TBA Player Registration No: |
| Address: | Post Code: |
| Please circle Male / Female Average: | Phone No.: (Home or mobile) () |
| | Association/Centre: |
| Facsimile No | I will be staying in Hobart from06 to06 |
| ALL ENTRY FORMS TO | GETHER WITH FEES, MUST BE FORWARDED TO |

TENPIN BOWLING AUSTRALIA TOURNAMENT TEAM, PO Box 181, Patterson Lakes, Victoria 3197 All enquiries regarding squad times and changes should be directed to RONDA HATCHARD - Ph (08) 8261 1623, Fax (08) 8261 3707, email: ronda.hatchard@tenpin.org.au

2006 AUSTRALIAN TENPIN BOWLING CHAMPIONSHIP ENTRY FORM

TEAMS ENTRY

ADULT SENIORS

ENTRY No.

Pref 1

Pref 2

| TEAM NAME: | | | | | | |
|--------------------|-----------|--------------|--------------------|--|--|--|
| Office use only | Full Name | M/F Mixed | Highest Average | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL AVERAGE: | | | | | | |
| AMOUNT REMITT | ED: \$ | GRADE: | | | | |
| | | | | | | |

ENTRIES MUST BE PAID IN FULL. UNPAID ENTRIES CANNOT BE PROCESSED

TEAMS SQUAD TIMES

TIME

DATE

DOUBLES ENTRY

ADULT SENIORS

ENTRY No.

| Office Use | | | | High | | DO | UBLES SQU | AD TIMES | | | |
|---|----------------|------|-----------|------|--------------|-------------|-----------|-------------------------------|-----------------------------|------------|-------|
| Only | | | | | Ifter | IVIXO | Ave | | - | DATE | TIME |
| | | | | | | | | | | | |
| | | | | | | | | | Pref 1 | | |
| | | | | | | | | | Pref 2 | | |
| | TOTAL AVERAGE: | | | | | | | TICIZ | | | |
| I wish to nominate this doubles entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS SENIOR CUP at \$10 per eve | | | | | vent | | | RS DOUBLES & PRISE ENTIREL | 2 TEAMS MUST Y OF SENIOR | | |
| AMOUNT REM | /IITTED | : \$ | | G | RADE: | | | | | BOWLEF | RS |
| SINGLES ENTRY ADULT SENIORS ENTRY No. | | | | | | | | | | | |
| Office use only | e | F | Full Name | | M/F Mixed | Higl Ave | | l | SIN | GLES SQUAD | TIMES |

| - | | - | | | |
|--------|-----------------------------------|-------------------|--------|------|------|
| | | | | DATE | TIME |
| | this singles entry to be used for | | Pref 1 | | |
| | RICTED OPEN MASTERS | at \$10 per event | Pref 2 | | |
| GRADE: | LD. φ | | | | L |

| ALL EVENTS | ENTRY | ADULT | SENI | ORS | | | |
|--------------------|-------|-----------|------|----------|-------|--------|-----------------|
| Office use only | | Full Name | M/F | High Ave | Grade | Amount | Entry Number |
| | | | | | | | |

| | All Events | Teams | Doubles | Singles | | | | |
|--|---|----------------------|-------------------|------------|--|--|--|--|
| | \$5.00 | \$150.00 | \$60.00 | \$30.00 | | | | |
| ENTRY FEES | PAYMENT OPTIONS : [] CASH, [] CHEQUE or [] CREDIT CARD | | | | | | | |
| CARDHOLDER'S INFORMATION - Please debit the amount of \$ | | | | | | | | |
| [] Mastercard | Cardholder's na | ime: | | | | | | |
| [] Visa | Cardholder's sig | gnature: | | | | | | |
| | Card exp. | / Transactio | n Date:// | | | | | |
| Card No | - | | | | | | | |
| ALL CHEQUES TO | BE MADE PAYABLE | TO TENPIN BOWLING AU | STRALIA TOURNAMEN | IT ACCOUNT | | | | |

2006 AUSTRALIAN TENPIN BOWLING CHAMPIONSHIP ENTRY FORM

TEAMS ENTRY

ADULT SENIORS

ENTRY No.

| TEAM NAME: | | | | |
|--------------------|--------|-----------|--------------|--------------------|
| Office use only | F | Full Name | M/F Mixed | Highest Average |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | TOTAL AV | /ERAGE: | |
| AMOUNT REMITT | ED: \$ | | GRADE: | |

DATETIMEPref 1______Pref 2______

TEAMS SQUAD TIMES

ENTRIES MUST BE PAID IN FULL. UNPAID ENTRIES CANNOT BE PROCESSED

DOUBLES ENTRY

ADULT

SENIORS

| Office Use | Office Use Full Name Qual M/F/ High Only MA Ave | High Ave | DOUE | BLES SQUAD | TIMES | | | |
|------------|--|---|------|------------|-------|--------|------|------|
| Ully | | | | шла | ////0 | | DATE | TIME |
| | | | | | | Pref 1 | | |
| | TOTAL AVERAGE: | | | | | | | |
| | ESTRICTED OPEN | to be used for qualifying in MASTERS SENIOR CI | | 10 per e | vent | | | |

DOUBLES ENTRY

ADULT

SENIORS

ENTRY No.

ENTRY No.

| Office Use Only | | Full Name | Qual M/F/ High ifier Mxd Ave | | - | DOUB | LES SQUAD | TIMES | |
|--------------------|------------|--|---------------------------------|--------|-----------|--------|-----------|-------|------|
| •, | | | | | | , | | DATE | TIME |
| | | | | | | | Pref 1 | | |
| TOTAL AVER | | | | RAGE: | | Pref 2 | | | |
| | RESTRICTED | es entry to be used fo OPEN MASTERS | SENIOR CUP | at \$1 | 10 per ev | vent | | | |

ALL EVENTS ENTRY ADULT SENIORS

| Office use | Full Name | M/F | High Ave | Grade | Amount | Entry |
|------------|-----------|-----|----------|-------|--------|-------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | | Team | Doubles | Singles | | | |
|-------------------|--------------|---|---------|---------|--|--|--|
| ENTRY FEES | CASH/CHEQUE/ | \$150.00 | \$60.00 | \$30.00 | | | |
| ENIRI FEES | CREDIT CARD | ALL CHEQUES TO BE MADE PAYABLE TO TENPIN BOWLING AUSTRALIA TOURNAMENT ACCOUNT | | | | | |

2006 AUSTRALIAN TENPIN BOWLING CHAMPIONSHIP ENTRY FORM

SINGLES ENTRY

ADULT SENIORS

ENTRY No.

| Office use only | Full Name | M/F Mixed | Highest Average | SING | ELES SQUAD | TIMES |
|---|-----------|--------------|--------------------|--------|------------|-------|
| | | | | | DATE | TIME |
| I wish to nominate this singles entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS SENIOR CUP at \$10 per event | | | | | | |
| AMOUNT REMITTED | : \$ | GRADE: | | Pref 2 | | |

SINGLES ENTRY

ADULT

SENIORS

ENTRY No.

| Office use only | Full Name | M/F Mixe | Highest d Average | SIN | SINGLES SQUAD TIMES | |
|---|-----------|-------------|----------------------|--------|---------------------|------|
| | | | | | DATE | TIME |
| I wish to nominate this singles entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS SENIOR CUP | | | 10 per event | Pref 1 | | |
| MOUNT REMITTED: \$ GRADE: | | Pref 2 | | | | |

SINGLES ENTRY

ADULT

SENIORS

ENTRY No.

| Office use only | Full Name | - | M/F lixed | Highest Average | SINGLES SQUAD TIMES | | TIMES |
|---|-----------|--------|--------------|--------------------|---------------------|------|-------|
| | | | | | | DATE | TIME |
| I wish to nominate this singles entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS SENIOR CUP | | | at \$10 | per event | Pref 1 | | |
| AMOUNT REMITTED | : \$ | GRADE: | | Pref 2 | | | |

SINGLES ENTRY

ADULT

SENIORS

ENTRY No.

| Office use only | Full Name | M/F Mixed | Highest Average | SINGLES SQUAD TIMES | | |
|---|-------------------------|--------------|--------------------|---------------------|------|------|
| | | | | | DATE | TIME |
| I wish to nominate this singles entry to be used for qualifying in: CLASSIC RESTRICTED OPEN MASTERS SENIOR CUP at \$10 per event | | | | Pref 1 | | |
| AMOUNT REMITTE | JNT REMITTED: \$ GRADE: | | Pref 2 | | | |

ALL EVENTS ENTRY

ADULT

SENIORS

| Office use | Full Name | M/F | High Ave | Grade | Amount | Entry |
|------------|-----------|-----|----------|-------|--------|-------|
| | | | | | | |
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