



2010 ILLINOIS PEPSI USBC YOUTH CHAMPIONSHIPS ZONE & STATE FINALS ENTRY FORM



12 & Over Division – Boys or Girls/Scratch or Handicap

ZONE 3 TOURNAMENT -- SQUAD DATE / TIME

Total Fee: \$23.00 (\$13 plus \$10.00 lineage)

Tournament location:

AMF Rolling Meadows

3245 Kirchoff Road

Rolling Meadows, IL 60008

847-259-4400

January 31, 2010 - 9 AM or 12 NOON

February 7, 2010 - 9AM or 12 NOON

Feb 21, 2010 - 8:30 AM (HS Bowlers Only)

1st Choice _____ 2nd Choice _____

**PLEASE BRING YOUR MEMBERSHIP CARD
TO HELP US CHECK YOU IN FASTER**

ENTRY AND EXPENSE FEES:

TO BE PAID WITH ENTRY FORM

State Scholarships	\$5.00
Zone Scholarships	\$3.75
Expenses	\$4.25
Lineage	\$10.00
Total	\$23.00

Scholarships will be returned
100% to the bowlers.

PLEASE PRINT LEGIBLY ALL INFORMATION

NOT RESPONSIBLE FOR SPELLING ON AWARDS IF
INFORMATION IS NOT LEGIBLE

BOWLER INFORMATION

NAME: _____

DATE OF BIRTH _____ / _____ / _____

(Birthday must be before 8/2/97 and bowler must be a current USBC Youth Member.

GENDER: Male Female

DIVISION: Scratch Handicap

PHONE (_____) _____ - _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

BOWLER'S EMAIL: _____

PARENT E-MAIL _____

USBC YOUTH MEMBERSHIP NUMBER: _____

**STATE MATERIALS WILL BE SENT VIA E-MAIL, PLEASE
PROVIDE US AN E-MAIL THAT YOU WILL BE USING IN
THE SPRING (MARCH-MAY)**

BOWLING CENTER INFORMATION:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE:(_____) _____ - _____

FAX:(_____) _____ - _____

E-MAIL: _____

I give permission for IL YBC to contact me via this fax number:

Bowling Center Signature

I CERTIFY THAT THIS YOUTH BOWLER QUALIFIES TO
ADVANCE TO THE ZONE OF THE IL PEPSI USBC YOUTH
CHAMPIONSHIPS TOURNAMENT. BOWLER'S AGE AND
AVERAGE HAS BEEN VERIFIED.

****Dated League Standing Sheet MUST be submitted****

USBC YOUTH LEAGUE CERTIFICATION # _____

Average as of NOVEMBER 15, 2009 _____

Coach Signature: _____

Coach Phone:(_____) _____ - _____

Coach Email: _____

This form must be completed and signed by a parent / guardian regardless of the bowler's age.

I, the undersigned parent/legal guardian of the listed athlete, have read this entry form and agree that the listed athlete will abide by the rules and regulations set forth by the USBC Youth and Illinois Pepsi USBC Youth Championships. I further authorize Illinois Pepsi USBC Youth Championships to communicate with me via the phone/fax/e-mail listed below.

DATE: _____

Parent/Guardian Signature: _____

Parent/Guardian Email: _____

Parent/Guardian Phone: (_____) _____ - _____

Parent/Guardian Fax: (_____) _____ - _____