

Please complete and email:

Name _____

USBC Number: (must have 2015-16 membership) _____

Email Address: _____

Events: Team _____ Doubles/Singles _____

Available dates (please check dates and times):

February: 20/21 _____ 27/28 _____

March: 5/6 _____ 12/13 _____ 19/20 _____

April: 2/3 _____ 9/10 _____ 16/17 _____ 23/24 _____

May: 7/8 _____ 14/15 _____

Average: _____ Not required

By submitting this form, I agree to have my name and availability published on the Michigan State USBC WBA website along with my email address.