GRAND STRAND USBC ASSOCIATION 2024 ANNUAL CITY CHAMPIONSHIP TOURNAMENT

Amount Enclosed \$

| Team Captain Information (Please Print) |  |
| :--- | :--- |
| Name: |  |
| Address: |  |
| City: | State: $\quad$ Zip: |
| Home Phone: | Cell: |

WOMEN'S TOURNAMENT Entry Form (Women Entries Only)

Entry No.

SELECT DATES

| TEAM EVENT |  | DOUBLES \& SINGLES EVENT <br> (No Doubles only or Singles only entries accepted, unless a re-entry) |  |
| :---: | :---: | :--- | :--- |
| DATES <br> Saturday 2/17 or <br> Sunday 2/25 | SQUADS 1:00 PM | DATES | SQUADS 1:00 PM |
| $\mathbf{1}^{\text {st }}$ |  | Sunday 2/18 or <br> Saturday 2/24 |  |
| $2^{\text {nd }}$ |  | $\mathbf{1}^{\text {st }}$ |  |

TEAM NAME:
Please supply a team name!!!! Otherwise you will be just a number

| Team Line-Up <br> List Bowling Order - Line-up will NOT be changed | Average | National ID Number | Check if entering <br> All Events | Check if <br> Re-Entry |
| :--- | :--- | :--- | :--- | :--- |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |


|  | Doubles Pair \#1 |  |
| :---: | :--- | :--- |
| 1. |  | Doubles Pair \#2 |
| Average: | National ID No: |  |
| 2. | Average: |  |
| Average: | National ID No. | Average: |

Make Checks Payable to: GSUSBCA
Mail to: Dorothy Davis - Tournament Director
708 Pipit Place Calabash, NC 28467
Phone 316-644-1780
E-Mail: grandstrandusbca@gmail.com

| $* *$ FOR OFFICE USE ONLY** |  |  |
| :--- | :--- | :--- |
| Team | Squad \# | $\$$ |
| Doubles | Squad \# | $\$$ |
| Singles | Squad \# | $\$$ |
| A/E |  | $\$$ |

