



**66TH ANNUAL STATE OPEN
HANDICAP CHAMPIONSHIP**
USBC CERTIFIED

ENTRY #: _____

DATE REC: _____

ENTRIES CLOSE APRIL 17, 2017

HANDICAP FOR BOTH DIVISIONS WILL BE 90% OF 240

THE TOURNAMENT WILL HAVE TWO DIVISIONS (CLASSIFIED & REGULAR)

CLASSIFIED DIV: TEAM 900 & BELOW DOUBLES 360 & BELOW SINGLES & AE 180 & BELOW	REGULAR DIV: TEAM 901 & OVER DOUBLES 361 & OVER SINGLES & AE 181 & OVER
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TEAM NAME:

PRINT	PLEASE PRINT FULL NAME AS APPEARS ON USBC CARD	BOWLER'S ID NUMBER	2015 - 2016 AVERAGE
1	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		
2	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		
3	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		
4	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		
5	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		
ONE OF THE BELOW MUST BE FILLED IN IF YOU HAVE THREE SETS OF DOUBLES & SINGLES			
6	FULL NAME HOME ADDRESS CITY/STATE ZIP CODE		

TEAM CAPTAIN _____ E-MAIL ADDRESS _____
HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____ PHONE () _____

DOUBLES/SINGLES				ENTRY CALCULATION:			
SETS OF DOUBLES & SINGLES (MUST HAVE TWO BOWLERS FOR EACH SET) BOWLERS MUST BOWL BOTH DOUBLES & SINGLES				HANDICAP		OPTIONAL SCRATCH	
SETS	Position on team	\$50.00 DBLS	\$25.00 SGLS	\$5.00 AE	\$20.00 DBLS	10.00 SGLS	\$5.00 AE
1							
2							
3							

TEAM @ \$125 = _____	TEAM @ \$50 = _____
DBLS @ \$ 50 = _____	DBLS @ \$20 = _____
SGLS @ \$ 25 = _____	SGLS @ \$10 = _____
AE @ \$ 5 = _____	AE @ \$ 5 = _____
GRAND TOTAL: _____	

****CREDIT CARDS ACCEPTED****
PLEASE ENTER CARD INFORMATION AT BOTTOM

****TEAM****
SWEETHEART LANES
2320 NORTH LINCOLN AVENUE
LOVELAND, CO 80538

PH #: 970-667-3510

****DOUBLES/SINGLES****
HIGHLAND PARK LANES
1900 59TH AVENUE
GREELEY, CO 80634
PH #: 970-330-2695

2017 TOURNAMENT DATES:
MAY 6, 7, 13, 14, 20, 21
MAY 27, 28 and JUNE 3, 4

TEAM SQUAD TIMES:
SAT: 10:00 AM, 2:30 PM, 7:00 PM
SUN: 8:30 AM & 1:00 PM

1ST CHOICE:
DATE: _____
TIME: _____
2ND CHOICE:
DATE: _____
TIME: _____

D/S SQUAD TIMES:
SAT: 9:00 AM, 2:00 PM, 7:00 PM
SUN: 8:30 AM & 1:30 PM

1ST CHOICE:
DATE: _____
TIME: _____
2ND CHOICE:
DATE: _____
TIME: _____

ALL-EVENTS \$5.00
ENTRY FEE \$25 PER PERSON PER HDCP EVENT HDCP PRIZE FUND: \$12.25 & EXPENSES: \$12.75

MAIL CHECK AND ENTRY TO:
COLORADO STATE USBC
1301 WHEDBEE, FORT COLLINS, CO 80524-4131
PHONE: (970) 493-3854 * FAX: (970) 493-4082
Website: www.coloradostateusbc.com

****MUST ENTER HDCP EVENTS****
TO ENTER SCRATCH EVENTS
ENTRY FEE \$10 PER PERSON PER EVENT
SCRATCH PRIZE FUND: \$9 EXPENSES: \$1
100% RETURN OF ALL PRIZE FEES

NAME ON CARD: _____ EXPIRATION DATE: _____
CREDIT CARD: VISA, M/C, DISC CARD #: _____ SECURITY CODE: _____

PLEASE READ DRESS CODE RULE #1 ON BACK. THERE WILL BE NO CAPRI'S ALLOWED