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| **LUTHERAN BOWLERS’ ASSOCIATION OF WISCONSIN**  **98th ANNUAL STATE TOURNAMENT**  **February 26, 2022 – April 24, 2022**  **Lakeshore Lanes**  **2519 Business Drive**  **Sheboygan, WI 53081**    **Dates: Sat Times: Sun Times:**  Feb 26/27 12 PM 11 AM  March 5/6 & 26/27 12 PM 11 AM  March 19/20(limited) 12 PM 11 AM  March 12/13 12 PM 1 PM  April 2/3(limited) 12 PM 1 PM  April 9/10 & 23/24 12 PM 11 AM  First Choice\_\_\_\_\_\_\_\_ Second Choice\_\_\_\_\_\_\_\_ Third Choice\_\_\_\_\_\_\_\_ | | | | | **HANDICAP EVENT FEES**  Prize Fund $ 6.00  Lineage $ 9.00  Expense $ 5.00  Total per person $20.00  Optional All Events $ 2.00  **OPTIONAL SCRATCH FEES**  Doubles, Singles, All Events,  $5.00 per event per person  100% of Prize Fee Returned | | **FOR YOUR ENTRY CALCULATION**  HANDICAP EVENTS  \_\_\_Team @$80 = \_\_\_\_\_\_\_  \_\_\_Doubles @$40 =\_\_\_\_\_\_\_  \_\_\_Singles @$20 =\_\_\_\_\_\_\_  \_\_\_All Events @$2 =\_\_\_\_\_\_\_  Total Handicap =\_\_\_\_\_\_\_  OPTIONAL SCRATCH EVENTS  \_\_\_Doubles @$10 =\_\_\_\_\_\_\_  \_\_\_Singles @$5 =\_\_\_\_\_\_\_  \_\_\_All Events @5 =\_\_\_\_\_\_\_  Total Scratch =\_\_\_\_\_\_\_  Total for Entry =\_\_\_\_\_\_\_ | |
| PLEASE DO NOT WRITE IN BLANKS TO THE RIGHT | | DATE  RECEIVED | | CHK  NO. | | AMOUNT  PAID | | BALANCE  DUE |
| **TEAM**  **NAME** | **DIV:** | | SOFTWARE WILL INDICATE CAPTAINS’  CITY ON THE STANDINGS BOARD | | | ( ) Check if bowling doubles and\or singles only. | | |

**NOTE:** IF LADIES NAME HAS CHANGED FROM LAST TOURNAMENT BOWLED IN, INDICATE PRIOR NAME IN PARENTHESES.

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| **POS** | **NAME(PLEASE PRINT NAME AS ON USBC CARD)**  **ENTER NAMES IN LINE-UP ORDER FOR TEAM**  **NO LINE-UP CHANGES ON SITE IN ANY EVENT.** | **CITY** | **AVERAGE**  (SEE  REV. SIDE) | **USBC NO.** | **NAME OF CHURCH** | **SYNOD** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |

FILL IN BOXES A, B, OR C IF ANY OF ABOVE BOWLERS ARE BEING PAIRED WITH BOWLERS FROM ANOTHER ENTRY FOR DOUBLES.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| POS  **A** | **NAME** | POS  **B** | **NAME** | POS  **C** | **NAME** |

Fill in boxes below: For handicap events enter **POS.ON TEAM** for corresponding bowler from above. Enter division and check each event entered.

For optional scratch events: Since two different bowlers may pair up for doubles, Enter names, division, and check each event entered.

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* HANDICAP EVENTS \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* +++++++++++++++++++++++ SCRATCH EVENTS ++++++++++++++++++++++++**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| SET | Pos on  Team | **DIV** | **D** | **S** | **AE** | SET | Pos on  Team | **DIV** | **D** | **S** | **AE** | SET | Pos on  Team | **DIV** | **D** | **S** | **AE** | SET | **NAMES** | **DIV** | **D** | **S** | **AE** | SET | **NAMES** | **DIV** | **D** | **S** | **AE** |
| **1** |  |  |  |  |  | **2** |  |  |  |  |  | **3** |  |  |  |  |  | **1** |  |  |  |  |  | **2** |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**SEND ENTRIES TO;** The captain certifies that the above information is accurate. Willful falsification will lead to prize forfeiture.

**TIM ZORN**

**21 E. ARNDT ST CAPTAIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOND DU LAC, WI 54935**

Phone: (920)517-9521 Email: tgzorn@charter.net **ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAKE CHECKS PAYABLE TO: LUTHERAN BOWLERS ASSN.** **CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP CODE\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE N0. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**C0MPLETE LIST OF RULES AND REGULATIONS ON REVERSE SIDE. EMAIL ADDRESS (OPTIONAL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**