



**ENTRY BLANKS MUST BE COMPLETELY AND PROPERLY FILLED OUT
OR WILL BE RETURNED TO APPLICANT
TEAM EVENT – SENIORS**

TEAM NAME _____ SENATE REPRESENTED _____

MIXED TEAMS ONLY (ANY 3-1 OR 2-2 COMBINATION)

CHECK FOR CORRECT AVERAGES

MUST BE FILLED OUT TNBA NUMBER	M/W	NAME INDICATE (M) MAN (W) WOMAN	FULL ADDRESS	CHECK FOR SINGLES	2008-09 HIGHEST AVERAGE	USBC #	DO NOT WRITE IN THIS SPACE
1							
2							
3							
4							

**DOUBLES EVENT – SENIORS
(No Mixed Doubles)**

INDICATE MEN (M) OR WOMEN (W)

MUST BE FILLED OUT TNBA NUMBER	M/W	NAME INDICATE (M) MAN (W) WOMAN	FULL ADDRESS	2008-09 HIGHEST AVERAGE	USBC #	DO NOT WRITE IN THIS SPACE
1						
2						
1						
2						

SQUAD TIMES

Senior Mixed Team
Saturday, 9/4/2010 – 8AM - 12 Noon

Date Rec'd. _____

Amt. Rec'd. _____

Entry No. _____

TEAM	SINGLES
\$160.00	\$5.00
	Per Bowler
	Optional

SQUAD TIMES

Senior Doubles
Friday, 9/3/2010 - 12 Noon
Sunday, 9/5/2010 – 9AM – 12 Noon

INDICATE DOUBLES CHOICE

INDICATE TEAM CHOICE

CHOICE	DATE	TIME
1 ST		
2 ND		

CHOICE	DATE	TIME
1 ST		
2 ND		

I/We hereby certify to the correctness of the above entries, make application to enter the Tournament and agree to abide by all Tournament Rules and Regulations.

(Signature of Captain) _____ Address _____ Phone No. _____ Area Code/ _____
 (Print Captain's Name) _____ City _____ Zip _____ Email: _____

**ENTRY MUST BE VERIFIED
FINAL ENTRIES CLOSE MIDNIGHT, JULY 1, 2010**

I hereby verify the above entry Date _____

USBC, City Association Secretary's Signature and Official Stamp

USBC RULE 319E NOW APPLIES TO ALL BOWLERS AVERAGING 210 OR LESS!

Make Certified Check or Money Order Payable to: Tri-Senate Tournament
 Mail To: Eugene Richardson, Tri-Senate Tournament Director
 P.O. Box 7492, Long Beach, CA 90807