

5th ANNUAL GREATER PORTLAND USBC ADULT/JUNIOR CHAMPIONSHIP

Certified by the United States Bowling Congress

4 Big days February 6-7, 13-14 February 2010
 Entries Close February 14 at 12:30 pm or When last squad is Full

Sponsored by:
General
Distributors



BOWLING CENTER

Interstate Lanes

6049 North Interstate
 Portland, OR 97217
 (503) 285-9881

INCOMPLETE ENTRY FORMS
 WILL NOT BE PROCESSED AND
 WILL BE RETURNED
 IMMEDIATELY TO COACH

PLEASE PRINT LEGIBLY

| Tournament Dates and Squad Times | | | |
|----------------------------------|----------|---------|-----------------|
| Feb 6 | 12:00 pm | squad 1 | 2:30 pm squad 2 |
| Feb 7 | 12:00 pm | squad 3 | 2:30 pm squad 4 |
| Feb 13 | 12:00 pm | squad 5 | 2:30 pm squad 6 |
| Feb 14 | 12:00 pm | squad 7 | 2:30 pm squad 8 |

Indicate squad time requests in box , lower right corner using squad #

Medals plus scholarship dollars awarded to First Place in each division.

All others placing in standings will have funds deposited at SMART for their future education.

Adult first place finishers will receive Medal

Mail all entries to;
 Greater Portland USBC
 15710 NE Glisan St. Ste 203
 Portland, OR 97230
 (503) 257-9511

NO MONEY WILL BE RETURNED AFTER ENTRY IS ACCEPTED

The Greater Portland USBC web-site will have results of this tournament
www.gpusbc.com

| ENTRY FEE | |
|-----------------------------------|----------------|
| Awards/scholarships | 3.50 |
| Lineage | 9.00 |
| Expenses | 1.50 |
| Total per person per Event | \$14.00 |

\$28.00 per Team

Entry fee must accompany entry
Checks made payable to GPUSBC
 -You must complete this section-
 Coach must sign: I verify all bowlers listed on this entry are members of GPUSBC and that all averages are listed correctly.
 Coaches signature _____
 X _____
 Coaches name _____
 Daytime phone _____
 Bowling center _____

Div I Age 15-21 Div 2 Age 12-14 Div 3 Age 9-11 Div 4 Age 8 & younger

LIST BOWLERS and INDICATE DIVISION
Full Name and Address and Date of Birth are required

Youth Ave Games
 Name _____ Date of Birth _____
 Member # _____
 Address _____
 Graduation Date: _____

Adult Ave Games
 Name _____
 Member # _____
 Address _____

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GREATER PORTLAND

For office use only Entry no _____ Date Received _____ Amount _____

SQUAD TIME REQUEST

Doubles 1st choice _____ 2nd choice _____