

Closing Date: August 5, 2018
 Accepting Credit Cards

Triangle Bowl

Proudly Presents the

Northwest Volcano Classic



Certified by the United States Bowling Congress
 Longview, WA May 18th – August 5th, 2018
 Lanes will be oiled prior to each squad



4-Person TEAM (\$100.00) Please List Bowlers in order of bowling First Name MI Last Name	Highest 2016-17 Average	April 1 st 2017 Average (If no Winter 2016-17)	National ID Card # REQUIRED	Team Event (circle squad date) May 18 Kickoff, 26-27 June 9-10, 16-17, 23-24, 30 July 1, 7-8, 14-15, 21-22, 28-29 August 4-5
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1.				TEAM SCHEDULE: (CIRCLE SQUAD TIME)
2.				
3.				
4.				
				Saturday 12:00 pm, 3:00pm
				Sunday: 10:00 am, 1:00 pm

SINGLES (\$25.00) & DOUBLES (\$50.00) First Name MI Last Name	Highest 2016-17 Average	April 1 st 2018 Average (If no Winter 2016-17)	Scratch Singles & Doubles (\$10 per person per event) CIRCLE BELOW	All Events (\$5 ea.)		Singles/Doubles (circle squad date) May 18 Kickoff, 26-27 June 9-10, 16-17, 23-24, 30 July 1, 7-8, 14-15, 21-22, 28-29 August 4-5
				Hdcp	Scratch	

1.			SS/SD		S/D SCHEDULE: (CIRCLE SQUAD TIME)
2.			SS/SD		
1.			SS/SD		
2.			SS/SD		Saturday: 12:00 pm, 3:00 pm
1.			SS/SD		Sunday: 10:00 am, 1:00 pm
2.			SS/SD		

<p>Please Print Legibly</p> <p>Team Name: _____</p> <p>Captain: _____</p> <p>Mailing Address: _____</p> <p>City: _____ State: _____</p> <p>Zip Code: _____</p> <p>Phone Number: () _____</p> <p>For e-mail confirmation, motel listing, maps provide:</p> <p>E-Mail Address: _____</p> <p>Local Association: _____</p>		<p>I hereby certify that the averages listed above and total entry fees as follows are enclosed:</p> <p>\$100/Team \$ _____ to cover TEAM event</p> <p>\$ 50/Doubles \$ _____ to cover each DBLS</p> <p>\$ 25/Singles \$ _____ to cover each SGLS</p> <p style="text-align: center;">OPTIONAL ALL EVENTS</p> <p>\$ 5/All Events \$ _____ to cover each Handicap</p> <p>\$ 5/All Events \$ _____ to cover each Scratch</p> <p>Scratch Singles _____ x \$10 _____</p> <p>Scratch Doubles _____ x \$20 _____</p> <p style="text-align: right;">\$ _____ TOTAL</p> <p>Sign Here: _____</p> <p style="text-align: right;">Signature of Team Captain</p>
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Mail Entries To: Triangle Bowl Phone: (360) 425-4060 ****VISA, or MASTERCARD****

700 Triangle Center E-Mail: trianglebowl@yahoo.com Name on Card: _____

Longview, WA 98632 Make Checks Payable to: Triangle Bowl Card Number: _____

** Credit card entries \$26 per person per event; cash and check entries \$25 per person per event** Expire Date: Month/Year _____