

Parent/Youth

2009-2010 BPAA INTERNATIONAL FAMILY TOURNAMENT

CONDUCTED BY THE MISSOURI STATE BOWLING PROPRIETORS ASSOCIATION

DATE: _____

YOUTH BOWLER (*PLEASE PRINT*) __Male __Female

PARENT BOWLER (*PLEASE PRINT*) __Male __Female

Name: _____

Name: _____

Mailing Address: _____

Mailing Address: _____

City, State & ZIP: _____

City, State & ZIP: _____

Date of Birth: _____

2008-09 Ending Average: _____

Age as of August 1, 2009: _____

Current Posted Average (Min. 21 Games): _____

2008-09 Ending Average: _____ # games _____

ADULT PHONE NUMBER: _____

Current Posted Average* _____ # games _____

ADULT E-MAIL: _____

YOUTH PHONE NUMBER: _____

***Minimum 15 Games in Teen Division, 9 Games in Youth Division**

HOUSE SCORES

	AVERAGE	BOWLER (PRINT NAME)	1 ST GAME	2 ND GAME	3 RD GAME	TOTAL SCRATCH
YOUTH						
PARENT						
	TEAM AVERAGE	TEAM HANDICAP				
		TOTAL WITH HANDICAP				

ZONE SCORES

	AVERAGE	BOWLER (PRINT NAME)	1 ST GAME	2 ND GAME	3 RD GAME	TOTAL SCRATCH
YOUTH						
PARENT						
	TEAM AVERAGE	TEAM HANDICAP				
		TOTAL WITH HANDICAP				

AVERAGE CUT-OFF DATES:

House: Current "Posted" Average

State Finals: April 20, 2010

TOURNAMENT DATES:

Center Qualifying: Now – March 28, 2010

Zone Qualifying: April 10-11, 17-18, 24-25, 2010

Specific Center & Zone Qualifying Dates Determined by Each Center

State Finals: May 8-9, 15-16, 22-23, and May 29-30, 2010

Location: TBA

ZONE TOURNAMENT ONLY DATE & TIME PREFERENCE

1.

2.

Local Center – Name & City

I HAVE READ THE RULES ON THE BACK AND
VERIFY THE AVERAGES TO BE CORRECT.

Proprietor/Youth Official Verifying Averages

Signature of Adult Bowler