



67th ANNUAL STATE WOMEN'S CLASSIFIED HANDICAP CHAMPIONSHIP TOURNAMENT

USBC CERTIFIED



ENTRIES CLOSE March 24, 2022

DATE REC: _____ AMOUNT REC: _____ ENTRY #: _____

TEAM NAME: _____

**** NOTE: 10 PIN RULE 319a/2 APPLIES ****

PRINT	PLEASE PRINT FULL NAME AS APPEARS ON USBC CARD	BOWLER'S ID NUMBER	2020 - 21 AVG
1	FULL NAME		
2	FULL NAME		
3	FULL NAME		
4	FULL NAME		

**** TEAM ****
SWEETHEART LANES
 2320 N. LINCOLN AVE.
 LOVELAND, CO 80538
 PHONE #: (970)667-3510

**** DOUBLES/SINGLES ****
HIGHLAND PARK LANES
 1900 59TH AVE.
 GREELEY, CO 80634
 PHONE #: (970)330-2695

2022 TOURNAMENT DATES:
APRIL 2, 3, 9, 10, 23, 24, 30
May 1

TEAM CAPTAIN _____ E-MAIL ADDRESS _____

HOME ADDRESS _____ CELL () _____

CITY _____ STATE _____ ZIP CODE _____ PHONE () _____

ASSOCIATION NAME: _____

CLASS 1: TEAM: 680 & OVER, DOUBLES: 340 & OVER, SINGLES & A/E: 170 & OVER

CLASS 2: TEAM: 577 - 679, DOUBLES: 289 - 339, SINGLES & A/E: 145 - 169

CLASS 3: TEAM: 576 & BELOW, DOUBLES: 288 & BELOW, SINGLES & A/E: 144 & BELOW

TEAM SQUAD TIMES:
 SAT: 9:00 AM & 1:30 PM
 SUN: 9:00 AM & 1:30 PM
1ST CHOICE:
 DATE: _____
 TIME: _____
2ND CHOICE:
 DATE: _____
 TIME: _____

****CREDIT CARDS NOW ACCEPTED** ENTER CARD INFO AT THE BOTTOM**

ENTRY FEE PER HANDICAP EVENT IS \$25.00 PER PERSON
 HANDICAP PRIZE FUND: \$12.00 & EXPENSES \$13.00
 SCRATCH TEAM ENTRY FEE: \$15.00 WITH PRIZE FUND: \$12.00 & EXPENSE FEE \$3.00
 ALL-EVENTS: \$5.00 PER PERSON

D/S SQUAD TIMES:
 SAT: 8:30 AM & 1:30 PM
 SUN: 8:30 AM & 1:30 PM
1ST CHOICE:
 DATE: _____
 TIME: _____
2ND CHOICE:
 DATE: _____
 TIME: _____

DOUBLES/SINGLES

ENTRY CALCULATION:

SETS OF DOUBLES & SINGLES
 (MUST HAVE TWO BOWLERS FOR EACH SET)
 BOWLERS MUST BOWL BOTH
 DOUBLES & SINGLES

HANDICAP
 ___ TEAM @ \$100 = _____
 ___ DBLS @ \$ 50 = _____
 ___ SGLS @ \$ 25 = _____
 ___ AE @ \$ 5 = _____

OPTIONAL SCRATCH
 ___ TEAM @ \$60.00= _____
 ___ All Events \$5.00= _____

MAIL CHECK & ENTRY TO:
CO STATE USBC (Attn. Charity Easter)
 1635 27th Avenue, Greeley, CO 80634-4935
 CELL: (303) 827-9669 FAX: (970) 515-5615
 E-MAIL: classyladiesusbc@gmail.com
 Website: www.coloradostateusbc.com

HANDICAP EVENTS

GRAND TOTAL: _____
BOWLERS MUST ENTER HANDICAP EVENTS

SETS	POSITION ON TEAM	\$5.00	
		ALL-EVENTS	ALL-EVENTS
1			
2			

NAME ON CARD: _____
 SECURITY CODE: _____ EXPIRATION DATE: _____
 CREDIT CARD: VISA, M/C, DISCOVER CARD #: _____