**Pennsylvania State USBC – 23rd Annual Youth Open Tournament**

Mail to: Brett Rearick, Tournament Director
308 Bay Mist Dr, Erie, PA 16505
Phone: (814) 449-0248 E-Mail: youthopentd@bowlpa.com

| DO NOT WRITE IN THESE SPACES | |
|---|---|
| ENTRY NUMBER | |
| DATE RECEIVED | |
| AMOUNT RECEIVED | |
| CASH/CHECK # | |

**Entry Contact Information**

| | |
|---|---|
| Enter Your Advance Reservation Confirmation Number Here: | |
| Name: | Evening Phone: |
| Address: | Daytime Phone: |
| | E-Mail |
| City, State, Zip: | ☐ **Please contact me I want to pay using a credit card.** |

| | | |
|---|---|---|
| ☐ ***Check if Bowling Team Event*** | ***Team Event - Bowling order above.*** | 1st Squad Choice: |
| Handicap Div ☐ or Scratch Div ☐ | Team Name: | 2nd Squad Choice: |

***Bowlers contact information for this entry, no matter what event your entering, If bowling Team this will be your bowling order.***

| # | Name / National ID | Address / City, State, Zip | Birth Date / Gender (M/F) | Entering Avg. |
|---|---|---|---|---|
| 1 | | | | |
| | List all leagues above bowler participates in. | League: Center: | | |
| | | League: Center: | | |
| 2 | | | | |
| | List all leagues above bowler participates in. | League: Center: | | |
| | | League: Center: | | |
| 3 | | | | |
| | List all leagues above bowler participates in. | League: Center: | | |
| | | League: Center: | | |
| 4 | | | | |
| | List all leagues above bowler participates in. | League: Center: | | |
| | | League: Center: | | |

***Doubles Event***

| # | Enter the bowler's name. | Handicap Div ☐ or Scratch Div ☐ | Squad Choice |
|---|---|---|---|
| 1 | | | 1st: |
| 2 | | | 2nd: |

| # | Enter the bowler's name. | Handicap Div ☐ or Scratch Div ☐ | Squad Choice |
|---|---|---|---|
| 1 | | | 1st: |
| 2 | | | 2nd: |

**Singles Event** / ***All Events***

| # | Enter the bowler's name. | Hdcp | Scratch | 1st Squad Choice | 2nd Squad Choice | All Events Handicap | All Events Scratch |
|---|---|---|---|---|---|---|---|
| 1 | | ☐ | ☐ | | | ☐ | ☐ |
| 1 | | ☐ | ☐ | | | ☐ | ☐ |
| 1 | | ☐ | ☐ | | | ☐ | ☐ |
| 1 | | ☐ | ☐ | | | ☐ | ☐ |

***Average Verification:*** _____ ***Signature of League Official/Association Manager***