

Tournament Roster Form

Return to: Steve Kunkel, P.O. Box 66, Camby, IN 46113

Fax: (317) 830-8791. Steve@indianagobowl.com.

Important Information: 1) Please print. 2) Due date: April 27, 2012 - Bowlers will not be eligible for tournament if form is late! 3) MUST HAVE CERTIFICATION NUMBERS.

School:			Gender: B G	
First Name:		Certification #:	Grade:	
Last Name:		Date of Birth:	Age:	
Address:		City:	Zip:	
Email:		Phone: ()		

School:			Gender: B G	
First Name:		Certification #:	Grade:	
Last Name:		Date of Birth:	Age:	
Address:		City:	Zip:	
Email:		Phone: ()		

School:			Gender: B G	
First Name:		Certification #:	Grade:	
Last Name:		Date of Birth:	Age:	
Address:		City:	Zip:	
Email:		Phone: ()		

School:			Gender: B G	
First Name:		Certification #:	Grade:	
Last Name:		Date of Birth:	Age:	
Address:		City:	Zip:	
Email:		Phone: ()		

School:			Gender: B G	
First Name:		Certification #:	Grade:	
Last Name:		Date of Birth:	Age:	
Address:		City:	Zip:	
Email:		Phone: ()		