

Make checks payable to: **MTCUSBC**

Forward this form & fees to Tournament Director: Jeffrey Blanchard, 27 Hampden Lane, Agawam, MA 01001

MTCUSBC Youth City Tournament Entry Form – Please complete info requested below

SQUADS: February 5th @ 12:00PM & 2:00PM, February 6th @ 9:00 AM, 11:30AM

TEAM ENTRY

Circle Date/Time Choice **FEB 5** **FEB 5** **FEB 6** **FEB 6**
 12:00PM **2:00PM** **9:00AM** **11:30AM**

		Team Name	Team Captain	Average	All Events Y / N
1.	USBC #	NAME:	Phone		
		ADDRESS:			
2.	USBC #	NAME:	Phone		
		ADDRESS:			
3.	USBC #	NAME:	Phone		
		ADDRESS:			

DOUBLES/SINGLES ENTRY

Circle Date/Time Choice **FEB 5** **FEB 5** **FEB 6** **FEB 6**
 12:00PM **2:00PM** **9:00AM** **11:30AM**

				Average	All Events
1.	USBC #	NAME:	Phone		
		ADDRESS:			
2.	USBC #	NAME:	Phone		
		ADDRESS:			

DOUBLES/SINGLES ENTRY

Circle Date/Time Choice **FEB 5** **FEB 5** **FEB 6** **FEB 6**
 12:00PM **2:00PM** **9:00AM** **11:30AM**

				Average	All Events
1.	USBC #	NAME:	Phone		
		ADDRESS:			
2.	USBC #	NAME:	Phone		
		ADDRESS:			

ENTRY FEE SUMMARY

_____ Team @ \$42.00 / team of three = \$ _____
 _____ Doubles @ \$28.00 / doubles of two = \$ _____
 _____ Singles @ \$14.00 / bowler = \$ _____
 _____ All events @ \$6.00 / bowler = \$ _____

TOTAL FEES = \$ _____