

17th ANNUAL CANADIAN MIXED CHAMPIONSHIPS

This tournament sanctioned by

The Canadian Tenpin Federation

ENTRANTS MUST BE CTF REGISTERED PARTICIPANTS TO PARTICIPATE
SEE RULE 1 FOR COMPLETE DETAILS.

CR Bowling
1661 16 Ave
Campbell River, BC

Thursday, November 21st - 7pm
Friday, November 22nd - 4:30pm, 7pm
Saturday, November 23rd – 9am, 11:30am, 2pm, 4:30pm, 7pm
Sunday, November 24th – 9am, 11:30am, 2pm, 4:30pm

Lane re-oiling will take place after every 2 shifts (if required)
Lanes are assigned as complete entries are received – the earlier your entry is received,
the better chance to get your preferred date and time.

EMAIL ENTRIES TO:

TOURNAMENT DIRECTOR

Sheila Stormo
3767 S Island Hwy
Campbell River, BC V9T 1L6
Stormo68@hotmail.com
250 923-5760

NOTE:

Tournament director reserves the right to add or cancel shifts/squads

CTF NATIONAL MIXED CHAMPIONSHIPS ENTRY FORM

| TEAM CAPTAIN (PERSON RESPONSIBLE FOR COMPLETING THIS FORM) | | | | | | | | |
|--|---------|---------------|----------------|----------------|--------------------------|--------------------------|-----|------------------|
| Full Name: | | | | CTF ID # | | | | |
| Address: | | | | Phone # | | | | |
| City, Prov, PC: | | | email: | | | | | |
| ALL BOWLERS ENTERING MUST COMPLETE THE FOLLOWING INFORMATION | | | | | | | | |
| Roster # * | CTF ID# | Bowler's Name | Street Address | City, Prov, PC | M | F | Age | Entering Average |
| Team Name: | | | | | | | | |
| 1 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| *REFER TO THIS NUMBER WHEN ENTERING BOWLERS IN EVENTS | | | | | | | | |

| TEAM SQUAD | | | | | | | |
|---|----------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|------------------|
| 1 st Choice: | | | | 2 nd Choice: | | | |
| Date: | | Time | | Date: | | Time | |
| DOUBLESQUAD | | | | | | | |
| 1 st Choice: | | | | 2 nd Choice: | | | |
| Date: | | Time | | Date: | | Time | |
| SINGLESQUAD | | | | | | | |
| 1 st Choice: | | | | 2 nd Choice: | | | |
| Date: | | Time | | Date: | | Time | |
| EVENTS (<input checked="" type="checkbox"/> ENTRY FEE FOR EACH BOWLER AND EVENT ENTERED) | | | | | | | |
| Bowling Position | Roster # | Team Handicap | Mixed Doubles Handicap | Open Doubles Handicap | Singles Handicap | All Events Handicap | Total Per Bowler |
| 1 | | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 10.00 | \$ |
| 2 | | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 10.00 | \$ |
| 3 | | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 10.00 | \$ |
| 4 | | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 40.00 | <input type="checkbox"/> \$ 10.00 | \$ |
| Total Fees | | \$ | \$ | | \$ | \$ | \$ |
| | | | | | | Total All Fees | \$ |