

JUNIOR LEAGUE REGISTRATION FORM

PLEASE COMPLETE ALL INFORMATION BELOW

Name _____ Boy / Girl (Circle)

Birth Date _____ Age _____ Registration Fee _____

Shirt Sz Circle: Youth: Sm Med Lge Adult: Sm Med Lg XLg

Address _____

City _____ State _____ Zip Code _____

Primary phone # _____ Alternative phone # _____

Parents Names: _____

Family Email: _____

Circle your age group: Saturday 9:30am 7 thru 12

Saturday 9:30am 13 thru 18

Returning league member _____ New league member _____

Your best estimate of your bowling average: _____

I have a team or some friends who want to bowl. Please list below but they should complete their own Registration form.

Their names and phone #'s are:

Name _____ Age _____ B G Phone _____

Name _____ Age _____ B G Phone _____

Name _____ Age _____ B G Phone _____

Name _____ Age _____ B G Phone _____