

SUMMER 2024
PLEASE COMPLETE THE INFORMATION BELOW
TO REGISTER FOR THE LEAGUE OF YOUR CHOICE

Contacts: _____

Name _____ Date _____
Address _____
City _____ State _____ Zip Code _____
Primary phone # _____ Alternative phone # _____
Email address _____
League selection: 1st Choice _____
2nd Choice _____
_____ I bowled in this league last year. _____ I am new to this league.
_____ I have bowled in a league before. My Average is about _____.
_____ I have _____ bowlers for my team.
I have a team or friends who want to bowl. They are:

Name _____ Phone # _____
Name _____ Phone # _____
Name _____ Phone # _____
Name _____ Phone # _____

630-690-2400 Fox Bowl www.foxbowl.com
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