

Bowl for Kids' Sake Team Registration and Roster

Team Name _____

Team Sponsored by (if applicable) _____

No. of Lanes to reserve (1 per every 4 players recommended) _____

Preferred Bowling Time (9 am, 10, 11, 12, 1, 2, 3, 4 pm) _____ Second Choice _____

Number of players (approximate is ok) _____

Team Captain Name _____

Address _____

Phone Number _____

E-mail _____

Bowler 2 Name _____

Address _____

Phone Number _____

E-mail _____

Bowler 3 Name _____

Address _____

Phone Number _____

E-mail _____

Bowler 4 Name _____

Address _____

Phone Number _____

E-mail _____

Bowler 5 Name _____

Address _____

Phone Number _____

E-mail _____

Office Use Only: Number of Team Members: _____ Bowling Time: _____ Lane Assignments: _____