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LEAGUE EXECUTIVE 5 PIN CHAMPIONSHIPS WINNER'S REPORT FORM

Zone/Decentralized A	ssociation:			
Tournament Director:				
E-Mail Address:				
Please Indicate:	In League Play {	}	One-Day Roll-off {	}
Date of Roll-off:		_Number	of Participants:	
Host Bowling Centre:				
AVERAGE BOOK. MUST SUBMIT COP THEY BOWL IN AN	ALL BOWLERS WI IES OF THEIR INDIV D MUST SHOW TH	HO ARE /IDUAL A' EIR SCOI	UE AVERAGE AS RECONDE LISTED IN THE AVERAGE SHEETS FROM	VERAGE BOOK ALL LEAGUES ND INCLUDING
WINNING PRESIDENT				
			ostal Code:	
Telephone: { }		Λ.		
		IV	lembership No.:	
E-Mail Address:				

WINNING SECRETARY				
Name:				
Address:				
City:				
Telephone: { }	Membership No.:			
E-Mail Address:				
Highest league average as recorded in the Average Book:				
WINNING TREASURER				
Name:				
Address:				
City:				
Telephone: { }	Membership No.:			
E-Mail Address:				
Highest league average as recorded in the Average Book:				

PLEASE FORWARD THIS WINNER'S REPORT FORM TO THE PROVINCIAL OFFICE IMMEDIATELY FOLLOWING THE CONCLUSION OF YOUR ROLL-OFF.