

**4th Annual State Championship Tournament
Conducted by the California USBC Association
ADVANCED REGISTRATION FORM**

Do Not Use This Form After December 31, 2008

Open to All Members of the California USBC Association Youth
Hosted by the Fresno USBC Association , Fresno, California
Team: AMF Sierra Lanes, Fresno
Doubles & Singles: AMF Rodeo Lanes, Clovis

Squad Dates: July 11-12
July 18-19
July 25-26
Aug 1-2
Aug 8-9
Aug 15-16 (only if needed)

Squad Times: Saturday - 9AM, Noon, 3PM
Sunday - 9AM, Noon, 3PM
Teams within 75 miles may not be able to bowl as a group or get preferred times. We will do our best to accommodate all groups.

Squads will be scheduled with **NO MORE THAN ONE (1) SET OF DOUBLES/SINGLES** on a lane. Teams consist of four (4) members. Dates will be reserved in the order they are received. Please indicate the **DATE & TIME** preferred. Also indicate whether date is more important than time or vice versa.

Team Event: Date & Time

Doubles/Singles: Date & Time

First Choice _____

2nd Choice _____

Time is more important than date _____

Date is more important than time _____

Number of teams reserved _____

Number of Doubles Sets reserved _____

Singles must bowl doubles (no 1/2 sets of doubles). If you have more doubles sets than lanes available, remaining doubles will be scheduled on subsequent or previous squad, if available.

DEPOSIT: A deposit of **\$92.00** per team must accompany this form. The deposit will reserve dates and times requested for that number of teams if not already allocated. If you do not designate the number of doubles, no allocation will be made. This reservation form must be received by the Tournament Director no later than December 31, 2008. Official entry forms will be sent out in December. Additional forms will be sent to local associations.

RESERVATIONS MADE WILL BE HELD ONLY UNTIL THE OFFICIAL ENTRY DEADLINE POSTMARKED NO LATER THAN MAY 15, 2009 (FRIDAY). MAKE CASHIER'S CHECK, MONEY ORDER OR CENTER CHECK PAYABLE TO: CALIFORNIA USBC.

Coach Name _____ Bowling Center _____

Your Address _____ City _____ Zip _____

Address is ___ Bowl or ___ Coach's Home Phone (____) _____ e-mail _____

Local Association _____ Bowl's Phone # (____) _____

Those including e-mail addresses will receive immediate date/time confirmations when received and scheduled.

FINAL ENTRY CLOSING DATE IS MAY 15, 2009 (OR WHEN ALL SQUADS ARE FILLED).

MAIL THIS FORM TO: CALIFORNIA USBC OFFICE, P. O. BOX 1497, VISTA, CA 92085-1497

IF CALLING, STATE OFFICE NUMBER IS: (760) 726-5449. Please leave number with area code when leaving a message. My e-mail is n.arvanitis@cox.net. (BEST TO USE E-MAIL)

OFFICIAL USE ONLY

DATE RECEIVED _____ TEAM DATES _____ D/S DATES _____