



**61ST ANNUAL STATE OPEN
HANDICAP CHAMPIONSHIP**
USBC CERTIFIED

ENTRY #: _____
DATE REC: _____

ENTRIES CLOSE APRIL 2, 2012

****CREDIT CARDS
NOW ACCEPTED****
PLEASE ENTER CARD
INFORMATION AT BOTTOM

**THE TOURNAMENT WILL HAVE TWO DIVISIONS (CLASSIFIED & REGULAR)
EACH DIVISION WILL HAVE ** \$5,000.00 ** ADDED PRIZE MONEY IN 2012**

REGULAR DIVISION: TEAM 901 & OVER,
DOUBLES 361 & OVER, SINGLES & AE
181 & OVER (HDCP 90% OF 230)

CLASSIFIED DIVISION: TEAM 900 & BELOW, DOUBLES 360 & BELOW
SINGLES & AE 180 & BELOW (HDCP 90% OF 230)

****TEAM****
AMF BROADWAY
5485 S. BROADWAY
LITTLETON, CO 80121
PH #: 303-794-6114

TEAM NAME:

PRINT	PLEASE PRINT FULL NAME AS APPEARS ON USBC CARD	BOWLER'S ID NUMBER	2010 - 11 Book or Jan 1, 12 Ave
1 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			
2 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			
3 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			
4 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			
5 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			

****DOUBLES/SINGLES****
AMF BELLEVIEW
4900 S. FEDERAL BLVD.
ENGLEWOOD, CO 80110
PH # 303-794-4265

TOURNAMENT DATES:
April 21, 22, 28, 29 - 2012
May 5 ,6, 12, 13, 19, 20, 26, 27 - 2012

TEAM SQUAD TIMES:
SAT: 10:00AM, 2:30PM, 7:00PM
SUN: 8:30AM & 1:00PM

1ST CHOICE:
DATE: _____
TIME: _____

2ND CHOICE:
DATE: _____
TIME: _____

D/S SQUAD TIMES:
SAT: 9:00AM, 2:00PM, 7:00PM
SUN: 8:30AM & 1:30PM

1ST CHOICE:
DATE: _____
TIME: _____

2ND CHOICE:
DATE: _____
TIME: _____

ONE OF THE BELOW MUST BE FILLED IN IF YOU HAVE THREE SETS OF DOUBLES & SINGLES

6 FULL NAME			
HOME ADDRESS			
CITY/STATE ZIP CODE			
TEAM CAPTAIN HOME ADDRESS	E-MAIL ADDRESS		
CITY STATE ZIP CODE PHONE ()			

DOUBLES/SINGLES

SETS OF DOUBLES & SINGLES (MUST HAVE TWO BOWLERS FOR EACH SET) BOWLERS MUST BOWL BOTH DOUBLES & SINGLES							
Sets	Position on team	HANDICAP EVENTS			SCRATCH OPTIONS		
		\$40.00 DBLS	\$20.00 SGLS	\$5.00 AE	\$20.00 DBLS	10.00 SGLS	\$5.00 AE
1							
2							
3							

ENTRY CALCULATION:

HANDICAP	OPTIONAL SCRATCH
___ TEAM @ \$100 = _____	___ TEAM @ 50.00= _____
___ DBLS @ \$40 = _____	___ DBLS @ \$20 = _____
___ SGLS @ \$20 = _____	___ SGLS @ \$10 = _____
___ AE @ \$ 5 = _____	___ AE @ \$ 5 = _____
GRAND TOTAL: _____	

ENTRY FEE \$20 PER PERSON PER HDCP EVENT HDCP PRIZE FUND: \$9.50 & EXPENSES: \$10.50

MAIL CHECK AND ENTRY TO:
COLORADO STATE USBC
956 S. SAKI DR., PUEBLO WEST, CO 81007-3080
PHONE: (719) 547-0944 * FAX: (719) 547-4121
Website: www.coloradostateusbc.com

****MUST ENTER HDCP EVENTS****
TO ENTER SCRATCH EVENTS
ENTRY FEE \$10 PER PERSON PER EVENT
SCRATCH PRIZE FUND: \$9 EXPENSES: \$1
100% RETURN OF ALL PRIZE FEES

NAME ON CARD: _____ **EXPIRATION DATE:** _____

CREDIT CARD: VISA, M/C, DISC CARD #: _____ **SECURITY CODE:** _____