

ILLINOIS USBC WBA
CHANGE OF CAPTAIN _____
CHANGE OF ADDRESS _____

TEAM HOUSE
CHECK IN SHEETS ____
ENTRY BLANK _____
SCORE RECAP _____
COMPUTER _____

ALL INFORMATION MUST BE FILLED IN: PLEASE PRINT OR TYPE

ENTRY# _____

TEAM NAME _____

NEW CAPTAIN'S NAME _____

COMPLETE ADDRESS (street, city state and zip)

TELEPHONE NO: (_____) _____

TEAM SCHEDULED _____ DATE _____ TIME _____ LANE _____