



Nor Cal Bowling Centers



# YBA Tournament Application

A rough draft of the entry form and a complete copy of the rules must accompany this application

## Tournament Information

Tournament Name \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Entry Closing Date: \_\_\_\_\_

Type	Held Previously	Check All That Apply	
Scratch _____	Yes _____	Team _____	Singles _____
Handicap _____	No _____	Doubles _____	All Events _____

## Center or Centers Where Tournament Will Be Held

1. \_\_\_\_\_  
Bowling Center \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
2. \_\_\_\_\_  
Bowling Center \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
3. \_\_\_\_\_  
Bowling Center \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
4. \_\_\_\_\_  
Bowling Center \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## \_\_\_\_\_

Tournament Director: \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Mail Completed Application along with a copy of rules and entry form to:

**YBA**  
**1024 Serpentine Lane, Suite 116**  
**Pleasanton, CA 94566**  
**Phone: 925-485-1855 Fax: 925-485-1858**

For Office Use Only:
Tourn. No _____
Approved: _____
Rules Included: _____

