

IOWA STATE MIXED TOURNAMENT – 2017

SUBSTITUTE FORM

ENTRY # _____
TEAM NAME _____ CAPTAIN _____
TEAM SCHEDULED DATE/TIME _____ MIXED DOUBLES SCHEDULED DATE/TIME _____
BOWLER OUT _____
BOWLER IN _____ USBC # _____ LOCAL ASSN. _____
SUBSTITUTE IS REPLACING ORIGINAL BOWLER IN: BOTH EVENTS _____ TEAM ONLY _____ MIXED DOUBLES ONLY _____

Substitute's highest average was _____ for _____ games:
A _____ As of the end of previous season (winter or summer)
B _____ As of Oct. 18 current season (including league play
Oct. 18), not less than 12 games in one league
C _____ Current average of at least 12 games (see rule #5c)
D _____ 240 average (entrant has none of above)

If the bowler dropping out is the team captain, please designate who will serve as team captain:

Name _____
Address _____
Phone _____

BOWLER MUST USE THE HIGHEST AVERAGE IN ALL USBC ASSOCIATIONS AND LEAGUES OF NOT LESS THAN 21 GAMES, (EXCEPT B & C ABOVE), IN THE ABOVE ORDER. ALL ENTRANTS MUST BE PAID MEMBERS OF EITHER THE IOWA STATE USBC WOMEN'S BOWLING ASSN., INC. OR THE IOWA STATE USBC BOWLING ASSN., INC.

Email/fax/mail this form or same information to:
Iowa State USBC WBA:
isusbcwba@frontiernet.net, fax to 515-576-4969 or USPS mail to
939 So. 24th St., Fort Dodge, IA 50501-6146.
OR present this form at the tournament office **90 minutes** prior to squad time.
Questions? Call Iowa State USBC WBA 515-576-5561.

Signature of Local Association Manager of Substitute Bowler

Local Association Name/Number of Substitute Bowler

NOTE: This form MUST be signed by the local Association Manager ONLY if using average option B or C. If the substitute's average is verifiable on bowl.com, NO signature is needed.

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