



MINNESOTA STATE USBC ASSOCIATION 69th Annual WOMEN'S Championships

USBC
Certified

January 26 – May 6, 2018

Excluding Easter Weekend March 30 – Apr 1
Opening Ceremony Squad – January 27, 2018 @ 1:30 PM

Country Lanes North
2327 Mountain Shadow Dr.
Duluth, MN. 55811
218-722-1741

Skyline Lanes
4894 Miller Trunk Hwy.
Hermantown, MN. 55811
218-727-8555

Team
Fri – 3:30PM
Sat – 10:00AM 1:30PM (5:00PM after 3/18/18)
Sun – 10:00AM, 1:30PM

Doubles & Singles
Fri – 11:00AM, 3:30PM
Sat – 9:00 AM, 1:30PM
Sun – 9:00AM, 1:30PM

ENTRY FEES DUE <i>This Entry ONLY</i>	
___ 4 Person Team @ \$100 =	_____
___ Doubles Pairs @ \$50 =	_____
___ Singles @ \$25 =	_____
___ Hdcp All Events @ \$4 =	_____
___ Hdcp Seniors (55+) @ \$5 =	_____
___ Opt Scr 4 -Team @ \$20 =	_____
___ Opt Scr Doubles @ \$10 =	_____
___ Opt Scr Singles @ \$5 =	_____
___ Opt Scr All Events @ \$5 =	_____
TOTAL FEES DUE _____	
\$25 Fee Charged on Returned Checks	

First Place Prizes in Each Division Team \$2000 --Doubles \$1000 --Singles \$500

Date & Time Reserved	We have NO Reservations Date & Time Preferred	Team	Doubles & Singles
_____	List 3 Different Weekend Choices	1. _____	_____
_____		2. _____	_____
_____		3. _____	_____

TEAM LINE-UP – List in Bowling Order Last Name, First Name & Initial	U S B C National ID #	2016-17 Average
1		
2		
3		
4		

Team Name _____
 Captain's Name _____
 Address _____
 City, State, Zip _____
 H Phone _____ W Phone _____

Name of Team We Wish to Pair With _____ E-Mail Address _____
Entry Forms MUST be Mailed Together

DOUBLES & SINGLES Bowlers MUST Enter Both Doubles & Singles	U S B C National ID #	2016-17 Average	Hdcp Senior	Hdcp All Events	Opt. Scratch Events		
					DbI	Sgl	AE
1A							
1B							
2A							
2B							
3A							
3B							

Send **FULL** Remittance to:
MN State USBC
Women's Championships
27672 213th St
Pierz, MN 56364
 For Reservations Contact
Sherri Hoheisel
Ph (320) 468-2991
Fax (320) 468-2991
 mnwomensbowling@hotmail.com
 Office Hours
Mon – Thur 10AM – 5PM
 Check availability on State website
 mnstatebowl.org

VISA & MASTERCARD ONLY!

Expiration
Date:

_____ / _____
Card Account Number

_____/_____
(Month / Year)

3 Digit Security Code
on reverse side of card
(If someone other than Captain is paying by credit card, please their include name and address)

My Signature Authorizes a Charge Request

CREDIT CARD USER ONLY!		Handling Fee Rate	
Entry Fee		\$\$ Charged	Fee
To Be Charged = \$	_____	\$ 0 - \$ 99 =	\$ 3
PLUS		\$100 - \$199 =	\$ 6
Handling Fee = \$	_____	\$200 - \$299 =	\$ 9
(See Rate Chart ->)		\$300 - \$399 =	\$12
TOTAL = \$	_____	\$400 - \$499 =	\$15
		... Etc. ...	