

2008 SACRAMENTO NISEI BOWLING ASSOCIATION INVITATIONAL TOURNAMENT

MEN'S EVENTS

Entry Fee Breakdown	AMF Land Park Lanes	Mail Entries To:
Prize Fund \$8.20	5850 Freeport Blvd. - Sacramento, CA 95822	SNBA Tournament
Lineage \$6.30	Phone: (916) 421-3671	354 Berthoud Street
Expenses \$2.50	Men's Events Squad Dates: Feb. 9-10 & 16-17	Sacramento, CA 95838
Total Fees \$17.00	Event Director: Chuck King (916) 834-5962	sacnisei@yahoo.com

Handicap: 80% of 220
 Prize Fund Returned 100%

**Entry Deadline: Postmarked
 January 12, 2008**

Make Checks Payable To: SNBA
 (Fees Must Accompany Entry)

Entry Submitted By (Please Print):	E-mail Address:	Home Phone: ()
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Mailing Address:	City:	State:	Zip Code:
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Bowler	Average	Book Year (1)	USBC No.	Eligible (2)	Team 1 (3) \$17.00	Team 2 (3) \$17.00	Singles Doubles \$34.00	All Events \$2.00	Total

(1) See rule 5 and write a, b, c, d, e, f, or g (2) Enter "N" for Nisei, or appropriate non-Nisei rule (3 or 4)
 (3) A bowler may bowl in more than one team event (see rules 13) (4) All Events is optional (see rule 14)

Total Fees:	
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Squad time preferences: Indicate your 1st, 2nd and 3rd choices.

The Tournament Committee reserves the right to place bowlers, and reserves the right to add, delete or alter squads.

Men's Team Event			
Team Name:			
Bowler Names	Squad Choices		
1.	1st	2nd	3rd
2.	#	#	#
3.			
4.			

Men's Singles / Doubles Event				
		Squad Choices		
Bowler Names		1st	2nd	3rd
1.		#	#	#
2.		#	#	#
1.				
2.		#	#	#
1.				
2.		#	#	#
1.				
2.		#	#	#
1.				
2.		#	#	#
1.				
2.		#	#	#
1.				

Squad Schedule	
Singles / Doubles	
Squad 3:	Feb. 9, 1:30 PM
Squad 6:	Feb. 10, 10:00 AM
Squad 7:	Feb. 10, 12:30 PM
Squad 14:	Feb. 17, 10:00 AM
Squad 15:	Feb. 17, 12:30 PM

Team	
Squad 4:	Feb. 9, 6:00 PM
Squad 5:	Feb. 9, 8:30 PM
Squad 12:	Feb. 16, 6:00 PM
Squad 13:	Feb. 16, 8:30 PM

Men's Team Event			
Team Name:			
Bowler Names	Squad Choices		
1.	1st	2nd	3rd
2.	#	#	#
3.			
4.			

I have read the rules and verify the information provided to be correct. I understand that failure to comply is cause for disqualification.

X
 Signature of Person Submitting Entry

Committee Use Only	
Entry Number	Date Received
Check #	Amount