**PREMIER YOUTH BOWLING**

**LEAGUE REGISTRATION**

**Email completed form to: gaphilip1@gmail.com**

**PLEASE PRINT LEGIBLY**

**TODAY’S DATE: \_\_\_\_­­\_\_ /\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_**

**Bowler Information:**

**BOWLER NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Name Middle Initial Last Name

AGE: \_\_\_\_\_ BIRTH DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_\_ \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE

Hand used for bowling: \_\_\_\_\_Right \_\_\_\_\_Left \_\_\_\_\_2-Handed Right \_\_\_\_\_2-Handed Left

USBC ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(8/1 – 7/31)**  **Current Year Fee (expected to be $11.00) due at registration or on**

**first day for new bowlers or if existing card has expired. Cash only (excludes bumpers group)**

Are there any injuries or physical limitations that would affect this bowler’s ability to bowl? \_\_\_ Yes \_\_\_ No

If YES explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Information: (do not provide phone or email of bowler)**

PARENT/GUARDIAN NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_

**(ADDRESS IS REQUIRED:**  **P.O. BOX CANNOT BE ACCEPTED)**

PHONE #: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE # 2 (optional): (­\_­\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL 2 (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorize bowling photos of my son/daughter to be taken/posted on the league website. \_\_\_\_Yes \_\_\_\_No

If eligible, end of season awards will be scholarships. Bumpers group will be trophies/plaques.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Age Groups based on August 1st Birthday. Bowler skill level will be considered in group placement.***

**OFFICE USE ONLY**

 **\_\_\_\_\_ New \_\_\_\_\_ Returning**

**\_\_\_\_\_ All Stars 14-18 \_\_\_\_\_ Rising Stars 8-13 \_\_\_\_\_ Superstars 4-7**