

*Lee Evans Tournament of The Americas*

**ADULT Division Bowler Entry Form**

*(Please type or print clearly)*

Name: \_

Age: \_

Name to be used for records:

Date of Birth (M/D/Y): \_

Address: \_

City: \_

State/Province: \_

Country: \_

Postal Code: \_

Telephone:(work)

(home) \_

Fax: \_

E-mail: \_

Occupation

DIVISION: ( X one)

MALE: \_

FEMALE: \_

Participated in the Tournament of The Americas in (years) \_

Major bowling accomplishments (give year) - tournaments, 300 games, etc  
(TYPE in here)

Bowling Average: \_

Highest Game: \_

Highest Set of 3 games: \_

If you are a member of USBC, give member number:

*AUTHORIZING OFFICIAL*

REQUIRED FEDERATION CODE: \_

Name: \_

Title: \_

Association Name

Telephone:(day)

Fax: \_

E-mail: \_

Return completed form to: Bowling Tournaments of The Americas Association  
6919 West Broward Boulevard #277  
Plantation, Florida 33317

Telephone: 1-954-577-9948

Fax: 1-954-423-4081

E-Mail: [toa@bowlingamericas.com](mailto:toa@bowlingamericas.com)

