

**Lee Evans Tournament of The Americas  
National Acceptance Form**

*Please print or type*

This is to advise that \_\_\_\_\_ intends to enter:  
*(Country Name)*

*(Give number of entries below)*

Adult Division:      \_\_\_\_\_Men (limit 2)      \_\_\_\_\_Women (limit 2)

Junior "A" Division: (16-19)      \_\_\_\_\_Boys (limit 2)      \_\_\_\_\_Girls (limit 2)

Junior "B" Division: (12-15)      \_\_\_\_\_Boys (limit 2)      \_\_\_\_\_Girls (limit 2)

Senior Division:      \_\_\_\_\_Men (limit 2)      \_\_\_\_\_Women (limit 2)

Delegate:      \_\_\_\_\_ (limit 1)

Coaches:      \_\_\_\_\_

*Check one:*

\_\_\_\_\_ Completed entry forms are enclosed      \_\_\_ Completed entry forms will be sent at later date

Bowlers to be selected. Ending date of qualifying? \_\_\_\_\_

Name of Federation: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (Day): \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Federation President: \_\_\_\_\_

Federation Secretary: \_\_\_\_\_

Official Submitting Form: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Required - Tournament Federation Code: \_\_\_\_\_

Return completed form to: **Bowling Tournaments of The Americas Association**

6919 West Broward Boulevard #277

Plantation, Florida 33317

Or Fax to: 1-954-423-4081

*Lee Evans* **Tournament of The Americas**  
**Entry Fees Form**

*Please return this form with National Acceptance Form*

Adult, Senior and Junior bowler participation fee - \$150.00 (US) per bowler  
Delegate and Coach entry fee - \$75.00 (US) per person  
Guest fees are \$75.00 (US) per person with Award Dinner + bus transportation or \$50.00 (US) Award Dinner but no bus.  
No charge for children under 12 years of age except for Award Dinner.  
Award Dinner tickets only - \$45.00 (US) per guest

Tournament ID will be issued to Bowlers, Delegates, Coaches and those Guests who use bus

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*Please check appropriate lines and give number in each category:*

\_\_\_\_\_ A check is enclosed with entries in the amount of \$ \_\_\_\_\_ to cover fees for:

\_\_\_\_\_ Adult bowlers                      \_\_\_\_\_ Junior Bowlers                      \_\_\_\_\_ Senior Bowlers

\_\_\_\_\_ Delegate and/or Coaches                      \_\_\_\_\_ Shirts

\_\_\_\_\_ Guests                      \_\_\_\_\_ Award Dinner Only:    \_\_\_\_\_ Adults                      \_\_\_\_\_ Children

\_\_\_\_\_ NO Check is enclosed - all fees will be paid to tournament office before opening ceremonies

*Please check as many lines as appropriate:*

Fees will be paid by

\_\_\_\_\_ Delegate for Team Members

\_\_\_\_\_ Individual Team Members

\_\_\_\_\_ Delegate for Team and Guests  
(if some guests will pay separately, please provide list if available)

\_\_\_\_\_ Individual Guests

\_\_\_\_\_ Individual Delegates and/or Coaches

Authorizing Signature: \_\_\_\_\_

Country: \_\_\_\_\_ Required Tournament Federation Code: \_\_\_\_\_

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6919 West Broward Boulevard #277  
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Or Fax to: 1-954-423-4081

*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 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone:(work) \_\_\_\_\_ (home) \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

DIVISION: (circle one)                      MALE                      FEMALE

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

Major bowling accomplishments (give year) - tournaments, 300 games, etc \_\_\_\_\_

\_\_\_\_\_

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

*Lee Evans Tournament of The Americas*

**SENIOR Division Bowler Entry Form**

*(Please type or print clearly)*

Name \_\_\_\_\_ Age \_\_\_\_\_

Name to be used for records \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone:(work) \_\_\_\_\_ (home) \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

DIVISION: (circle one)                      MALE                      FEMALE

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

Major bowling accomplishments (give year) - tournaments, 300 games, etc \_\_\_\_\_

\_\_\_\_\_

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

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*Lee Evans Tournament of The Americas*  
**JUNIOR Division "B" (ages 12-15) Bowler Entry Form**

*(Please type or print clearly)*

Name \_\_\_\_\_ Age \_\_\_\_\_

Name to be used for records \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone:(work) \_\_\_\_\_ (home) \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

DIVISION: (circle one)                      MALE                      FEMALE

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

Major bowling accomplishments (give year) - tournaments, 300 games, etc \_\_\_\_\_

\_\_\_\_\_

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

*Lee Evans Tournament of The Americas*  
**JUNIOR Division "A" (ages 16-19) Bowler Entry Form**

*(Please type or print clearly)*

Name \_\_\_\_\_ Age \_\_\_\_\_

Name to be used for records \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone:(work) \_\_\_\_\_ (home) \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

DIVISION: (circle one)                      MALE                      FEMALE

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

Major bowling accomplishments (give year) - tournaments, 300 games, etc \_\_\_\_\_

\_\_\_\_\_

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  
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**Lee Evans Tournament of The Americas  
Delegate and Coach Entry Form**

Please list your Official Delegate (1) who will accompany team. Your Official Delegate will have the responsibility for all official tournament and team business, including Lane Marshall of the Day, paying fees, checking scoresheets, completing and returning forms, and making any substitutions on team. (Please fill in all requested information)

**Delegate Form**

(Delegate) Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Occupation: \_\_\_\_\_

Telephone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Coach Form** (for additional coaches, please fill out a separate form for each coach)

(Coach) Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Occupation: \_\_\_\_\_

Telephone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Authorizing Official:**

**Federation Code** \_\_\_\_\_

Name \_\_\_\_\_ Title: \_\_\_\_\_

Association Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Lee Evans Tournament of The Americas**  
**GUEST ENTRY FORM**

There are two levels of Guest fees:

1. \$75 - Includes all activities on official schedule, except competition bowling, one ticket to Award Banquet and tournament bus or tournament hotel shuttle transportation between hotel and lanes. Ages under 6 are free, however no banquet ticket. Official Tournament ID will be issued to these guests to be used for bus services.

2. \$50 - Includes all activities on official schedule and , except competition bowling, one ticket to Award Banquet; *no* tournament bus or tournament hotel shuttle transportation between hotel and lanes. Ages under 6 are free, however no banquet ticket.

Guest fees may be mailed to us in form of check or money order in US Funds and made payable to "Bowling Tournaments of The Americas Association". All checks or money orders must arrive by August 1st. Payment in the Tournament Office will be accepted in cash, travelers checks or credit card. Payment by credit card will incur an extra 4% processing fee.

If additional guest names have the same surname, enter only first name in 2nd through 6th boxes.

Total Number of Guests you are registering \_\_\_\_\_

Amount to be paid per guest (please check one) \_\_\_\$75 (with bus service) \_\_\_ \$50 (no bus service) *Please fill out separate forms if levels of fees differ on guests below.*

Name of Guest\*\*\* \_\_\_\_\_

\*\*\**Give this persons address, email, etc, information below.*

Additional Guest \_\_\_\_\_ If child give age \_\_\_\_\_

Additional Guest \_\_\_\_\_ If child give age \_\_\_\_\_

Additional Guest \_\_\_\_\_ If child give age \_\_\_\_\_

Additional Guest \_\_\_\_\_ If child give age \_\_\_\_\_

Additional Guest \_\_\_\_\_ If child give age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (Daytime) \_\_\_\_\_ Fax \_\_\_\_\_

E-mail: \_\_\_\_\_

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

Fax: 1.954.423.4081

Questions? Tel: 1.954.577.9948



Lee Evans Tournament of the Americas

HOTEL RESERVATION FORM

Fill out ONE FORM PER ROOM

Our 2007 Official Tournament Hotel

Crowne Plaza Resort Hotel at Fort Lauderdale Sawgrass Mills
13400 West Sunrise Boulevard, Sunrise, Florida 33323

Hotel Reservation requires credit card information for "first night" deposit to hold any reservation. Credit card will not be charged unless you fail to show without 48 hour prior notice to Tournament Office. A separate form must be submitted for each room requested. Form must have full names of all persons who will occupy room.

All rates quoted are the same for a single, double, triple or quad room for up to 4 persons sharing a room. Rooms have king bed or 2 double beds. Room rate is the same for entire length of stay as long as the dates include our tournament dates. Due to our special sponsor hotel rates, no reservations will be taken directly by hotel at the tournament rate. All reservations and cancellations must be made through the Tournament Office. The room placement is at the discretion of the hotel, any requests for specific rooms or area in the hotel (upgrades) will be at higher price than the Tournament's special rate for a standard room. Suites are also available at a tournament reduced rate.

Special Sponsor Rate: SINGLE, DOUBLE, TRIPLE OR QUAD IS THE SAME RATE - \$105.00 per room/per night + 11% tax. Payable to hotel. There is an extra \$15 per night charge for a roll-away bed. Free parking in covered garage.

Reservation deadline - July 26, 2007. Reservations arriving at the Tournament Office later than deadline, may be charged at hotel's regular rack rate of \$149 and/or rooms may not be available. The hotel has set this deadline to reserve rooms. We can not guarantee availability after this date.

ARRIVAL DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Phone \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Number in party \_\_\_\_\_ MUST LIST NAMES OF ALL PERSONS WHO WILL OCCUPY ROOM:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

PLEASE RESERVE:

\_\_\_\_\_ 2 DOUBLE BEDS in ROOM \_\_\_\_\_ 1 KING BED \_\_\_\_\_ Smoking \_\_\_\_\_ Non-Smoking

Special requests: \_\_\_\_\_

CREDIT CARD INFORMATION: ADVANCE DEPOSIT - CREDIT CARD GUARANTEE REQUIRED.

Type \_\_\_\_\_ Number \_\_\_\_\_ Expires \_\_\_\_\_

Name as it appears on Card: \_\_\_\_\_

SIGNATURE of person responsible for payment: \_\_\_\_\_

Return to: Bowling Tournaments of The Americas Association, 6919 W. Broward Blvd., Plantation, FL 33317
Or Fax to 1-954-423-4081

**Lee Evans Tournament of The Americas  
Tournament Shirt Order Form**

**Federation Code:** \_\_\_\_\_

The 2006 Official Tournament shirt will be a black 2-button polo shirt with collar, short banded sleeves with the tournament logo *embroidered* on front in gold color. *Our official shirt changed in 2005. If you have a shirt from last year, you do not need to order another unless you wish to.* When ordered with information below, shirt will have given (first) name on front, surname (last name) and country name with map on the back also done in embroidered gold color. If you are a delegate or coach, that designation will be on the back of the shirt. Consider that these are *not* oversized shirts as in the past when ordering sizes, note chest sizes. Women's fit in small only. The cost of each shirt is \$35.00 (USD). Check your information carefully. Shirts are to be paid for with Entry Fees and must be paid for if they are made. If you make a mistake, email us immediately, we will *try* to stop the order. Submit form with your entry forms.

(1.) Name \_\_\_\_\_ Number Ordered \_\_\_\_\_

Check One:  Men's Shirt size       Women's Shirt size (*comes in small only*)

Check Size:     Small in Women's fit     Men's Small (34-36)     Men's Medium (38-40)  
 Men's Large (42-44)     Men's Ex Large (46-48)     Men's XX Large (50-52)  
 Men's XXX Large (54-56)     Other \_\_\_\_\_

Please Type or *clearly* Print your name exactly the way you want it to appear on the shirt.

\_\_\_\_\_  
FRONT of shirt (given / first name)

\_\_\_\_\_  
BACK of shirt - Surname / last name

Country \_\_\_\_\_  Delegate  Coach

\*\*\*\*\*

(2.) Name \_\_\_\_\_ Number Ordered \_\_\_\_\_

Check One:  Men's Shirt size       Women's Shirt size (*comes in small only*)

Check Size:     Small in Women's fit     Men's Small (34-36)     Men's Medium (38-40)  
 Men's Large (42-44)     Men's Ex Large (46-48)     Men's XX Large (50-52)  
 Men's XXX Large (54-56)     Other \_\_\_\_\_

Please Type or *clearly* Print your name exactly the way you want it to appear on the shirt

\_\_\_\_\_  
FRONT of shirt (given / first name)

\_\_\_\_\_  
BACK of shirt - Surname / last name

Country \_\_\_\_\_  Delegate  Coach

.....

(3.) Name \_\_\_\_\_ Number Ordered \_\_\_\_\_

Check One:  Men's Shirt size       Women's Shirt size (*comes in small only*)

Check Size:     Small in Women's fit     Men's Small (34-36)     Men's Medium (38-40)  
 Men's Large (42-44)     Men's Ex Large (46-48)     Men's XX Large (50-52)  
 Men's XXX Large (54-56)     Other \_\_\_\_\_

Please Type or *clearly* Print your name exactly the way you want it to appear on the shirt

\_\_\_\_\_  
FRONT of shirt (given / first name)

\_\_\_\_\_  
BACK of shirt - Surname / last name

Country \_\_\_\_\_  Delegate  Coach

Lee Evans Tournament of The Americas

Media Information

Please supply us with information for your local media (newspapers, magazines, etc.) so that we may send them information (daily and/or final results, pictures and stories) on your team's participation in the Lee Evans Tournament of The Americas. Please tell us if they will have a representative at the tournament or someone participating will be forwarding information to your media contacts.

Daily scores are on our website - [www.BowlingAmericas.com](http://www.BowlingAmericas.com)  
(click on *Current Scores* on Tournament of Americas menu page)

Media Name \_\_\_\_\_ Type \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

\_\_\_\_\_ Someone will be reporting at tournament

Name of reporter: \_\_\_\_\_

Remarks: (any special requests) \_\_\_\_\_

Time Deadline? \_\_\_\_\_

Return completed form to:  
**Bowling Tournaments of The Americas Association**  
**6919 West Broward Boulevard #277**  
**Plantation, Florida 33317**  
**Or Fax to: 1-954-423-4081**