



Delegation Registration

Delegation Name _____

Head of Delegation _____

Address _____

City _____ State _____ ZIP _____

Phone Work _____ Home _____ Cell _____

Email _____

List all coaches, and chaperons who will be attending the competition with the delegation. Please indicate the roles by placing an "X" in the appropriate column.

Name	Email	HOD	COACH		CHAP
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Delegation Registration Continued...

<i>Name</i>	<i>Email</i>	<i>HOD</i>	<i>COACH</i>	<i>PART</i>	<i>CHAP</i>
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42.					



Bowling Entry Form - North Regional

**NOTE: All athlete entries must have an average score recorded in the appropriate box next to their name.
Entries without scores will not be registered.**

Delegation:							
Name		DOB	Gender		Average	RampAvg.	Assiste RampAvg.
1.	Example: Athlete Name	11/11/2012	M				100
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