

**Team Event**  
**Stardust Bowl II**  
 3925 E Lincoln Hwy  
 Merrillville, IN 46410  
 219/942-0432

Entry #	_____
Date	_____
Received	_____
Amount \$	_____

SUNDAY TEAM  
 June 29, 2008  
 9:00 AM, if more than 64 teams 12:30 PM  
ENTRY DEADLINE  
May 1, 2008

**TEAM NAME:** \_\_\_\_\_

**CAPTAIN:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **State:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

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

**I.B.E.W. LOCAL #:** \_\_\_\_\_

**TEAM EVENT \$100.00 (20.00 PER PERSON):**

Bowler ID.	NAME	ADDRESS	USBC	Year Ending
Office Only			Sanction #	AVE.
1				
2				
3				
4				
5				
6	One of the below must be filled in, if your fifth bowler is bowling with someone else.	NOTE: COMPANION TEAMS MUST BE SENT TOGETHER IF YOU WANT SAME LANES AND DOUBLES AND SINGLES TIME.		
IF NOT on another team	6a			
Bowler on another team	Name Only :	Companion Team Captain's Name :		
	6b			

**Certification:**

I hereby certify that all entrants who's Names appear on this Entries are bona fide members of the IBEW or registered apprentices.

Signed: \_\_\_\_\_ Local Union #: \_\_\_\_\_