

2019 IOWA STATE USBC OPEN STATE CHAMPIONSHIP TOURNAMENT SUBSTITUTE FORM

ENTRY # _____
TEAM NAME _____ CAPTAIN _____
TEAM SCHEDULED DATE/TIME _____ DOUBLES/SINGLES SCHEDULED DATE/TIME _____
BOWLER OUT _____
BOWLER IN _____
SUBSTITUTE'S USBC #. _____ SUBSTITUTE'S LOCAL ASSN. _____
SUBSTITUTE IS REPLACING ORIGINAL BOWLER IN: ALL 3 EVENTS _____ TEAM ONLY _____ DBLS/SGLS ONLY _____

Substitute's highest average was _____ for _____ games:
1 _____ As of the end of previous season (winter)
2 _____ As of FEB. 1 current season, 21 games or more, in USBC certified league
3 _____ Summer league average will be used if bowler has no winter league average in 1 or 2 above.
4 _____ 210 average, scratch, Sport bowling averages will not be used.

If the bowler dropping out is the team captain, please designate who will serve as team captain:

Name _____
Address _____
Phone _____

BOWLER MUST USE THE HIGHEST AVERAGE IN ALL USBC ASSOCIATIONS AND LEAGUES OF NOT LESS THAN 21 GAMES IN THE ABOVE ORDER. ALL ENTRANTS MUST BE PAID MEMBERS OF THE IOWA STATE USBC BOWLING ASSN., INC.

Email/fax/USPS mail this form or same information to:

Iowa State USBC:

iowastateusbc@frontier.com / 515-576-4969 (fax) or mail to
935 So. 26th St., Fort Dodge, IA 50501-6146.

OR present this form at the tournament office **2 hours** prior to squad time.

Questions? Call Iowa State USBC 515-576-5561

NOTE: This form MUST be signed by the local Association Manager ONLY if using average option 2. If the substitute's average is verifiable on bowl.com, NO signature is needed.

Substitute Bowler Signature of Local Association Manager

Substitute Bowler Local Association Name

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