

Team Roster - (Page 1 of 2)

Please type or print legibly. This form must be filled out completely. List ALL coaches and bowlers who are participating.
 If necessary, use another form. Use a separate form for each team. You must submit a waiver for each person listed.
 If new coaches/bowlers are added throughout the season, submit the new info only or highlight it to prevent duplicates.

Forms must be returned to coordinator by their set date. Names and waivers need to be filed with the IHSB commissioner October 22, 2018.
 Tournament roster needs to be trimmed to 10 players. Must be at State office by December 17, 2018.

Conference

School

Bowling Center Name

Team (Please Indicate)

Boys	<input type="text"/>
Girls	<input type="text"/>
Coed	<input type="text"/>

Proprietor/Mgr First Name

Proprietor/Mgr Last Name

Phone

Email

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Coach Information

	Coach First Name	Coach Last Name	Phone	Email
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Team Roster - (Page 2 of 2)

School:		Team: Boys Girls Coed			
	Bowlers First Name	Bowlers Last Name	Gender	Grade	USBC Certification #
1					
2					
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