

# 2017 Mo. Knights of Columbus 64th Annual Handicap Bowling Tournament

— Your Host —

**FATHER LEWIS COUNCIL #1321 - FREDERICKTOWN**

**To Be Bowled in  
FARMINGTON FUN CENTER  
HWY 67  
FARMINGTON, MO**

**Weekends of OCTOBER 21-22  
OCTOBER 28-29, 2017**

## COMBINATION ENTRY BLANK

This Entry Blank May Be Used For All Three or Team Event Only



**Singles & Doubles**

**Team Event**

**Saturday, Oct. 21**

11:00 a.m.  
3:15 p.m.

**Sunday, Oct. 22**

9:00 a.m.  
12:15 p.m.  
(3:15 p.m. if needed)

**Saturday, Oct. 28**

11:00 a.m.  
3:15 p.m.

**Sunday, Oct. 29**

9:00 a.m.  
12:15 p.m.  
(3:15 p.m. if needed)

**DATE & TIMES DESIRED: Important – List 1st and 2nd Choice  
SINGLES/DOUBLES TEAM**

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

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

MORAL SUPPORT SANCTION OF UNITED STATES BOWLING CONGRESS provides high score protection for those who have established membership in the Congress prior to participation. Allows for the participation of those not affiliated with the Congress without payment of any dues. Unaffiliated teams and individuals wishing to secure high score protection may do so by paying \$21.00 per player with entry.

FOR OFFICE USE ONLY — DO NOT WRITE IN THESE				
Team	Doubles	Singles	All-Events	TOTAL

**PRIZE FEE WILL BE RETURNED 100% IN PRIZES.**

Prize ratio: At least one prize for each 10 entries or better.

**MAIL YOUR ENTRY AS SOON AS POSSIBLE.**

Traveling teams will be given preference of squad times, PROVIDED ENTRIES ARE RECEIVED BEFORE TIMES ARE FILLED

**TEAM EVENT (Please Type or Print Names)  
(\$85.00 ENTRY ENCLOSED)**

The \_\_\_\_\_ Bowling Team

representing Council \_\_\_\_\_ hereby makes application for entry in team event and will be composed of the following members:

List names in order you wish them to appear on the official score sheet. Score Sheets will be prepared in advance according to position as listed.

Please Print or Type		Average
1.		
Council #	Membership #	
2.		
Council #	Membership #	
3.		
Council #	Membership #	
4.		
Council #	Membership #	
5.		
Council #	Membership #	

**DOUBLES AND SINGLES EVENTS**  
(Give Name in Full - Please Print)  
**The word "PARTNER" will not be accepted**  
**No Half Entries Will Be Accepted.**

**\$34.00  
PER  
BOWLER**

Those entering the Special All-Events Prize Fund, Indicate the \$2.00 entry fee on the same line with name to be entered.



Please Print or Type	Average	All-Events	Council #	Membership #
1.				
2.				
1.				
2.				
1.				
2.				

FOR OFFICE USE ONLY	Singles Schedule	Time	Name of 6th Man _____ Team He is On _____

**ENTRY FEE: ENCLOSE \$17.00 PER BOWLER FOR EACH EVENT - PLUS \$2.00 PER BOWLER WHO ENTER THE OPTIONAL SPECIAL ALL EVENTS. (Example; If bowler enters singles/doubles, team and all events) TOTAL WOULD BE \$53.00 PER BOWLER.**

**NOTE: All remittances MUST be made in form of P.O.M.O., Express Money Order or Check, and be made payable to the Missouri K. of C. Bowling Tournament, and mailed on or prior to Oct. 13, 2017 to Shaun Mell, Secretary-Treasurer, 7705 hwy T, Fredericktown, MO 63645. Telephone: CELL 573-631-8649. RESERVE ENTRIES CLOSE MIDNIGHT OCT. 13, 2017.**

• (BE SURE TO READ RULES ON BACK SIDE) •

CAPTAIN (Print) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone (Include Area Code) \_\_\_\_\_

(NOTE: IF ADDITIONAL COPIES ARE NEEDED, JUST MAKE A PHOTO-COPY OF THE FRONT SIDE OF THIS FORM)

FOR OFFICE USE ONLY	Team Average	Handicap
		x 3 =
FOR OFFICE USE ONLY	Team sched.	Time