



## Pepsi Entry Form

**ALL FIELDS MUST BE FILLED IN TO BE ACCEPTED**

Must be Postmarked by District Deadline Date – See District Schedule for Dates

<b>Pennsylvania State USBC</b> <b>PEPSI YOUTH BOWLING CHAMPIONSHSIPS</b> Mail to: Jay E Daryman, Tournament Director 809 Nightlight Dr, York PA 17402 Phone:717/757-2860 E-Mail: <a href="mailto:jdaryman@bowlpa.com">jdaryman@bowlpa.com</a>		<b>DO NOT WRITE IN THESE SPACES</b>	
		<b>ENTRY NUMBER</b>	
		<b>DATE RECEIVED</b>	
		<b>AMOUNT RECEIVED</b>	
		<b>CASH/CHECK #</b>	
<b>Entry Contact Information</b>			
Enter Your District Number Here:		Center:	
Name:		Evening Phone:	
Address:		Daytime Phone:	
		E-Mail:	
City, State, Zip:			
<b>Bowler Information</b>			
1	Name:		Mem ID:
	Address:		City/State/Zip:
	Birthday:		Sex (M/F):
1 <sup>st</sup> Squad Choice:		2 <sup>nd</sup> Squad Choice:	
Check Division: <input type="checkbox"/> U8 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U15 <input type="checkbox"/> U18			

**MAKE CHECKS PAYABLE TO: Pennsylvania State USBC**



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Enter Your District Number Here:		Center:	
Name:		Evening Phone:	
Address:		Daytime Phone:	
		E-Mail:	
City, State, Zip:			
<b>Bowler Information</b>			
1	Name:		Mem ID:
	Address:		City/State/Zip:
	Birthday:		Sex (M/F):
1 <sup>st</sup> Squad Choice:		2 <sup>nd</sup> Squad Choice:	
Check Division: <input type="checkbox"/> U8 <input type="checkbox"/> U10 <input type="checkbox"/> U12 <input type="checkbox"/> U15 <input type="checkbox"/> U18			

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