

BOWLING

TEAM REGISTRATION FORM SUMMER 2025

Please fill out all information as completely as possibile. All athlete participants MUST sign the Amateur Athlete Waiver and Release of Liability.

| ast Name: | | First Name | | | | | M.I.: |
|---|----------------|---------------|---|--|---|---------------------------|------------|
| Mailing Address: | | | | | | | |
| city: | State: | Zip Code: | | Phone Number | : | | |
| Date of Birth (mm/dd/yy): | Age: | _ Gender: | Emai | (Required): | | | |
| mergency Contact Name: | | | Emergency Cont | act Phone Number: | | | |
| MEDIA RELEASE Do you give permission to rele your participation in the Badge | | one number to | members of the | media interested in in | terviewing you abo | out | |
| Events: 3 person team based on averages Youth 550 & Above Youth 549 & Below How did you hear about Badger State Games?: | ☐ Adult Scrat | | 3 bowlers for medals. Finals Format: Bronze Two practice balls pric Averages: Use your m fication is the respons will be verified using E average, use the follow Youth Boys: Age 12 & L Adult Men: 190 Adult W Minimum 21 games ne | ost current average listed on bowl.com USBC average to determine your division. USBC veri biblity of the atthlete and current sanction card must be presented when registering. Averages bowl.com. Enter average in "players averages" section when registering online. If no verifiable ving averages: Indiana 1970 of the provided of the pr | | | |
| How many times have you participated in the games? Bowling Average Player 1: | | | Definitions: (Age deter Youth – Based on your Adult – Based on your Scratch – Event with n Team – Any combination and under, 550 and ov USBC sanctioned ever | on of three adult men and/or adult er with the 549 division using 100 t. If you are not sanctioned a \$5 fe | ent). can be up to 21 years of age. can be 18 years and older. women may make up a tea % handicap. se will be collected to cover se | m. Teams will be split in | to 549 |
| Bowling Average Player 2: Bowling Average Player 3: Venue Affiliation: | | | Please fill o you! Mail/Fax Youth/Adult | ut for our records. Th Team: \$80 stration: \$90 | | | |
| All Bowlers must bowl in average appropriate division | | TOTAL: | | | | | |
| Official Team Roster: | | | | I | | | |
| Name (Please Print) | Phone Number | | Age | Date of Birth | Gender | Waiver | Shirt Size |
| To pay by credit card (Visa/Mastercard): Name as appears on card: Card Number: CVV (3 digit code on back): Billing Address: | Exp. I ure: | Date: | | Please mak Badger Sta P.O. Box 148 Wausau, WI Phone: 715- Fax: 715-359 | 6 54402 355-8788 | | |