State TEAM Roster WORKSHEET

Use this worksheet to collect your bowler information. For speed and accuracy, enter your information online at www.bowlwi.com/high-school-bowling-club/.

Form due to BCAW by February 16.

✓ One: ☐ Boys/Coed Team ☐ Girls Team ✓ One: ☐ Division 1 ☐ Division II

Team Name		**Team Coach Name***		**RVP/ School ID Expiration**
		Team Coach Email		
Team Center		Team Coach Cell		
Team Center City		**Team Coach Name***		**RVP/ School ID Expiration**
		Team Coach Email		
District #		Team Coach Cell		
Coordinator Name		**Coordinator Email**		

*Maximum two coaches per team at State.

[PLEASE PRINT LEGIBLY] List ALL bowlers on the team.

✓ Squad Assigned by District Coordinator: ☐ **Friday** 7 p.m. ☐ **Saturday** ☐ 9:30 a.m. ☐ 1:30 p.m.

Bowler Name	✓ **Gender**	**Grade**	**Grad. Year**	**USBC #**	**School Attending**
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				
	☐ Male ☐ Female				

Placed in District: **Team Highlights:**

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revised 1/21/20