



2020-21 WI HSBC Team Information Sheet

Form due to district coordinator one week prior to the start of district competition and to BCAW (roger.dalkin@bowlwi.com) no later than the start of district competition.

Send a copy of the student IDs to the district coordinator only.

Do not send copies of the student IDs to BCAW.

District # _____

✓ One: Boys/Coed Team Girls Team

✓ One: Varsity Junior Varsity

✓ which school(s) below recognize bowling with a varsity letter

High School In case of co-ops, list each school.	City	✓ varsity letter	High School In case of co-ops, list each school.	City	✓ varsity letter

Team Name	Team Coach Name
	Team Coach Email
Team Center	Team Coach Cell
Team Center City	Team Coach Name
	Team Coach Email
	Team Coach Cell

List ALL bowlers on the team and attach copies of student IDs. Send IDs to district coordinators only.

[PLEASE PRINT LEGIBLY]

Bowler Name	✓ Gender	Grade	School Attending
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	<input type="checkbox"/> Male <input type="checkbox"/> Female		

FOR BCAW OFFICE USE ONLY

Revised 9/9/20

BCAW Member? Yes No

Team Registration Fee: \$50 BCAW Member \$75 BCAW Non-Member