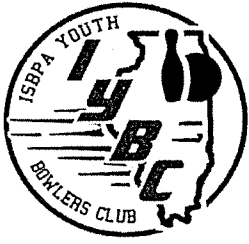


**STORM/ROTO GRIP YOUTH HANDICAP SINGLES TOURNAMENT
TO BE CONDUCTED IN
ILLINOIS STATE BPA ESTABLISHMENTS**



REPORT FORM

CENTER NAME _____

CITY/TOWN _____

PLEASE COMPLETE THE FOLLOWING:

Total number of entries in the PRELIMINARY ROUND (league play): _____

TOTAL NUMBER OF ENTRIES at the IN-CENTER ROLL-OFF: _____

**ONE BOWLER IN EACH DIVISION OUT OF EVERY FOUR BOWLERS (1:4) ENTERED AT THE
IN-CENTER ROLL-OFF WILL ADVANCE TO THE STATE FINALS.**

BANTAM DIVISION		PREP DIVISION		JUNIOR DIVISION		MAJOR DIVISION	
#Center RO	#Advancing	#Center RO	#Advancing	#Center RO	#Advancing	#Center RO	#Advancing

AS SOON AS YOU HAVE COMPLETED THE IN-CENTER ROLL-OFF of the TOURNAMENT, PLEASE MAIL THIS REPORT FORM, ALL COMPLETED ENTRY FORMS, IN-CENTER ROLL-OFF RECAPS (separated by division) & CHECK PAYABLE to Illinois State BPA for \$60.00 per ADVANCING BOWLER to STATE FINALS:

ILLINOIS STATE BPA
2020 Indian Boundary Drive
Melrose Park, IL 60160
Tel. (847) 982-1305 Fax (847) 982-9048



NO later than April 2, 2022

WE WILL AUDIT ENTRIES & NOTICES WILL BE SENT TO ALL BOWLERS ADVANCING TO THE STATE FINALS FROM THE ILLINOIS STATE BPA OFFICE.

BE SURE ALL AVERAGES & SCORES HAVE BEEN VERIFIED.

SUPERVISOR: _____ TEL: _____

E-MAIL: _____