

TEAM REGISTRATION – 2012 BFKS

TEAM CAPTAIN \_\_\_\_\_ TEAM NAME \_\_\_\_\_

Address

\_\_\_\_\_  
Street Number City State Zip  
Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Age: under 18 over 18 Sex:  M  F  
Employer \_\_\_\_\_ T-shirt Size:  S  M  L  XL  XXL

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TEAM Member #2 \_\_\_\_\_

Address

\_\_\_\_\_  
Street Number City State Zip  
Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Age: under 18 over 18 Sex:  M  F  
Employer \_\_\_\_\_ T-shirt Size:  S  M  L  XL  XXL

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TEAM Member #3 \_\_\_\_\_

Address

\_\_\_\_\_  
Street Number City State Zip  
Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Age: under 18 over 18 Sex:  M  F  
Employer \_\_\_\_\_ T-shirt Size:  S  M  L  XL  XXL

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TEAM Member #4 \_\_\_\_\_

Address

\_\_\_\_\_  
Street Number City State Zip  
Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Age: under 18 over 18 Sex:  M  F  
Employer \_\_\_\_\_ T-shirt Size:  S  M  L  XL  XXL

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TEAM Member #5 \_\_\_\_\_

Address

\_\_\_\_\_  
Street Number City State Zip  
Phone (h) \_\_\_\_\_ Phone (w) \_\_\_\_\_ Age: under 18 over 18 Sex:  M  F  
Employer \_\_\_\_\_ T-shirt Size:  S  M  L  XL  XXL

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TEAM CAPTAIN!!!!!! Please fill out the information completely regarding your team. Check the date and place you team would like to bowl. Return this sheet to BBBSID, 545 Shoup Ave., Suite #341, Idaho Falls, ID 83402 or fax to (208) 523-6317. Your promptness will enable us to serve you better and be as organized as possible. **Thanks!**

**Bowl-ero Lanes - Idaho Falls**

\_\_\_\_\_ Friday Night, February 24@10:00pm

\_\_\_\_\_ Saturday, February 25@1:00pm

<b>OFFICE USE:</b>
Time _____
Lane # _____