

Entry # \_\_\_\_\_  
 Date Received \_\_\_\_\_  
 Amount Received \_\_\_\_\_  
 Team \_\_\_\_\_ D/S \_\_\_\_\_

# 60th Annual First Coast USBC Pee Wee City Championship February 1-2, 2025

ENTRY FEES FOR EACH EVENT:				
ENTRY FEES:	TEAM	DBLS	SNGLS	TOTAL
LINEAGE	\$7.00	\$7.00	\$7.00	
SCHOLAR. FEE	\$0.50	\$0.50	\$0.50	
EXPENSES	\$0.50	\$0.50	\$0.50	
PRIZE FUND	\$5.00	\$3.00	\$3.00	
<b>TOTAL</b>	<b>\$13.00</b>	<b>\$11.00</b>	<b>\$11.00</b>	<b>\$35.00</b>

TEAM NAME: \_\_\_\_\_ BOWLING CENTER: \_\_\_\_\_

Print Name as listed on USBC Sanction Card; Line-up order will not be changed

	USBC BOWLER ID#	BOWLER NAME	AVERAGE	BOY/ GIRL	DATE OF BIRTH
<b>1</b>					/ /
<b>2</b>					/ /
<b>3</b>					/ /
<b>4</b>					/ /
SUB					/ /
SUB					/ /

DOUBLES PAIR #1		
	BOWLER NAME	AVERAGE
1		
2		
SUB		

DOUBLES PAIR #2		
	BOWLER NAME	AVERAGE
1		
2		
SUB		

**SCHEDULE REQUEST:** Please indicate your first and second choices for each squad selection below

**Team @**     \_\_\_ SAT 2/1 - 10:00am

**Batt FFC**    \_\_\_ SAT 2/1 - 1:30pm

**Dbls/Sngls @** \_\_\_ SUN 2/2 - 9:30am

**Mandarin**   \_\_\_ SUN 2/2 - 1:30pm

I CERTIFY THE TEAM, DOUBLES/SINGLES INFORMATION TO BE ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE:

PRINT COACH NAME: \_\_\_\_\_

\_\_\_\_\_  
 Email address

\_\_\_\_\_  
 Phone Number

**INFORMATION:**

SEND ORIGINAL ENTRY FORM BY SUNDAY 1/18/25 TO:  
 FIRST COAST USBC  
 PO BOX 26345  
 JACKSONVILLE, FL 32226

\*\* PLEASE DO NOT SEND REDUCED COPIES \*\*

SEND JANUARY 1ST AVERAGES WITH ENTRY FORMS  
 OR VIA EMAIL TO FCUSBCYOUTH@GMAIL.COM

Tournament Directors: Diane Limer, Todd Percival,  
 and Ryan Waters