Return this entry form with your entry fee(s) postmarked no later than February 27, 2026, to:

St Joseph USBC, 2535 Jules St, Saint Joseph, MO 64501 or email to: manager@stjosephbowling.com
Make check payable to: ST JOSEPH MO USBC BVL

LEAGUE: _____   BOWLING CENTER: _____

Contact Person: _____   Membership ID #: _____

Mailing Address: _____   Phone: _____

Email (preferred): _____

If no average from 2024-25 (of at least 12 games/highest average, **including** summer) then use average as of Date of Participation (DOP) (of at least 12 games). <u>Make sure it is on the recap form</u>. All others bowl <u>scratch</u>. (*Date of Participation (DOP) is the day you bowl BVL scores.*)

Most of the required information required on this entry form is found on your League Roster.

Bowler	$20 per bowler Pd	USBC ID # (required)	M/F	Make sure averages are filled in (1) OR (2) OR (3)			Game #1	Game #2	Game #3	Series	FOR OFFICE USE ONLY
				(1) 2024-25 Average If none >>	(2) "DOP" Average & # games If none >>	(3) Scratch 240					
											Donation Received
											Money Received
											Entry #
											Squad #

(Squad number will determine the day of the week you bowl, i.e., Monday - squad 1, Tuesday - squad 2, etc.)

When completed, return this form to verify scores. *Verification (recap, etc.) is still required*. Thank you!
Score verification (recap sheets) must be postmarked by March 23, 2026.

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RECAP SHEET

St Joseph USBC, 2535 Jules St, Saint Joseph, MO 64501 or email to: manager@stjosephbowling.com
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LEAGUE: _____ BOWLING CENTER: _____
Contact Person: _____ Membership ID #: _____
Mailing Address: _____ Phone: _____
Email (preferred): _____

If no average from 2024-25 (of at least 12 games/highest average, **including** summer) then use average as of Date of Participation (DOP) (of at least 12 games). Make sure it is on the recap form. All others bowl scratch. (***Date of Participation (DOP) is the day you bowl BVL scores.***)

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RECAP SHEET   **RECAP SHEET**

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