

The DeMolay International Chapter-Challenge Bowling Tournament



Rules & Entry Form 2002 – 2003

*It's time to lace up your
bowling shoes and hit the lanes!*



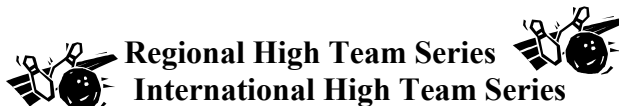
How it works:

Hold a chapter bowling event.

Send your results to DeMolay headquarters.

**Find out how you stack up against other chapters
from around the globe.**

Awards will be presented in the following categories:



Tournament Rules

All teams **must** bowl between November 1, 2002 and January 31, 2003. Scores submitted that were bowled during another time period will **not** be accepted. All entries **must be postmarked** by February 5, 2003 and **received no later than** February 18, 2003.

Entry fee is: \$10 per five (5) member team.

Ten pin bowling only (no handicaps). A chapter may enter more than one team; however, each bowler may compete on only one team. A team may enter only once. Each team member **must** bowl three (3) lines with the team, and each team member **must** be an active DeMolay in good standing.

The members of the team must be decided before competition play begins. Bowlers are allowed to practice; however, a team must decide that it is beginning a competition game before the first frame is bowled. (You cannot list the best five players out of ten, or the best three games out of five, etc.)

Awards will be sent to each recipient's Executive Officer for presentation. All teams entered will receive a list of the winners.

2002 – 2003 Chapter-Challenge Bowling Tournament Entry Form

Chapter Name: _____ City/State: _____ ID Number: _____

I hereby certify that the rules were followed, play was fair, and the scores on this form were reported accurately.

Certifying Advisor Print Name: _____ Certifying Advisor Sign: _____

<i>Please Print Name</i>	ID Number	1	2	3	Total
1					
2					
3					
4					
5					
Team Total					

Return this form with entry fee to:
DeMolay International
Service & Leadership Center
10200 NW Ambassador Drive
Kansas City, MO 64153
Fax: (816) 891-9062
1-800-DEMOLAY

Entries sent by fax must use credit card for payment.

Method of Payment:

Enclosed: Check Money Order

Charge: Master Card Visa American Express Discover

Cardholder's Name (Please Print)

Cardholder's Signature:

Credit Card Number

Expiration Date: