

Bowling at its Best



# SIGN UP TODAY!

2009 – 2010

## Spooner Youth Bowling Program

This form is due by Wednesday, December 2 or 9, 2009

### Kegler's Pub & Pin

412 N River Street • Spooner, WI 54801

715-635-8706 • [www.KeglersPub.com](http://www.KeglersPub.com)

Fax: 715-635-2690

Please enroll my child, named below (one child per form, please), in the following 10-Week Bowling Sessions:

Circle one or both →

Thursdays at 3:45 PM

Saturday s at 9:00 AM

Circle 1, 2, or 3→

~~Fall (Sept – Nov)~~

Winter (Dec – Feb)

Spring (Mar – May)

**Please Note:** All youth ages 6 & up are eligible to bowl; bowlers are grouped by age. We recommend enrolling in two 10-week sessions to provide enough competition opportunities for continued growth in bowling each year.

**Sanction & Lineage Fees:** Due by Wednesday, Dec 2 (for Thursday bowlers) or Dec 9 (for Saturday bowlers) unless payments arrangements have been made

Pre-paid \$80 lineage fee = \_\_\_\_\_ \$80

One-time Annual USBC Sanction Fee (Incl. magazine & jersey) + \_\_\_\_\_ \$17

(Optional: Basic Sanction Fee Membership for \$5 per 10-week session \_\_\_\_\_ \$5)

**Note:** DO NOT pay both Sanction Fees and DO NOT pay Sanction Fees

more than once during the 2009-2010 bowling year = \_\_\_\_\_ ← Total due

Payment method (circle one): →

Cash (enclosed)

Check (enclosed)

Credit Card (complete form here)

(Circle one) → VISA, MC, DCVR Name as it appears on card \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Billing address of credit card (PO Box or house #, street, city, state, and ZIP): \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CV security code: \_\_\_\_\_ (see back of card)

We use the contact information below to reach you in case of an emergency involving your child.

\*\*\* **PARENTS: PLEASE PRINT CLEARLY** as this form is our primary source of your contact information.

Child's First & Last Name: \_\_\_\_\_

Parent's First & Last Name(s): \_\_\_\_\_

Phone # (with area code): \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Mailing Address (#, Street, City, State, ZIP) if different from billing address: \_\_\_\_\_