PERFECT GAME AWARD REPORT FORM

BOWLERS' NAME: _____

C5PBA MEMBERSHIP NUMBER: _____

BOWLERS' ADDRESS:_ _____

CITY/TOWN, PROVINCE: _____

POSTAL CODE/TELEPHONE: _____ ( )_____

BOWLING CENTRE: _____

LANE CERTIFICATION NUMBER: _____

PINSETTING EQUIPMENT: [ ] String [ ] Free-fall

Manufacturer:_____

BOWLING PINS USED: [ ] Wood [ ] Synthetic

Manufacturer:_____

BOWLING BALLS USED: [ ] House [ ] Personal

Manufacturer:_____

Brand Name:_____

SPONSORS:
(E. PARRELLA CO., C5PBA, HOULT-HELLEWELL TROPHIES, JL BOWLING SUPPLY)

MAIL or EMAIL the completed form with a copy of the scoresheet to:
Alberta 5 Pin Bowlers' Association
PO Box 53680, RPO Ellerslie
Edmonton, AB T6X 0P6
a5pba@telus.net

DATEOF 450 GAME: _____

BOWLERS' CURRENT LEAGUE AVERAGE: _____

WAS THIS GAME BOWLED IN:
[ ] LEAGUE PLAY [ ] TOURNAMENT

NAME OF LEAGUE/TOURNAMENT:_____

WERE C5PBA RULES USED: [ ] YES [ ] NO

WHICH GAME (ie 1st, 2nd, etc.):_____

IS BOWLER LEFT OR RIGHT HANDED: [ ] LEFT [ ] RIGHT

TYPE OF BOWLING SHOE WORN:_____SIZE :_____

(NOTE - THIS FORM MUST BE COMPLETED IN FULL)

COMPLETED BY:_____

ADDRESS:_____

CITY/TOWN, PROV.:_____

POSTAL CODE/TELEPHONE:_____ ( )_____

_____
Signature of person completing form

_____
Signature of Provincial President

Revised August 2024