

For Office Use Only
- Do Not Write In This Space -
 New Entry: _____
 Duplicate: _____

All Jackpots,
\$5.00 each.

Mail Completed Entry Form and Payment To:
Idle Hours South - No-Tap Tournament
 125 Beech St. • Scranton, PA 18505
 (570) 961-5213 • FAX: (570) 207-6838
 E-mail: ssbnotap@idlehoursentertainment.com

INDICATE 1ST, 2ND & 3RD CHOICES ON CHART BELOW		
	TEAM	DOUBLES
1.) Date/Time		
2.) Date/Time		
3.) Date/Time		

TEAM NAME/CITY _____ CENTER BOWLED

PRINT FULL NAME ACCORDING TO USBC CARD NO REARRANGING OF ORDER ALLOWED AT CHECK-IN	CAPT	Street Address City/State, Zip & Phone	National ID #	HLA 20-21	HLA 21-22	HLA 3/1/23	Email Address	GAME	SUMS	M (L)	M (H)	< (L)	> (H)
1.		_____ Phone: _____ Zip: _____								1 7	1 8	2 1	2 1
2.		_____ Phone: _____ Zip: _____								9 &	0 &	0 &	1 &
3.		_____ Phone: _____ Zip: _____								B	A	B	A
4.		_____ Phone: _____ Zip: _____								E	B	E	B
5.		_____ Phone: _____ Zip: _____								O W	V E	O W	V E

DOUBLES EVENT

PRINT FULL NAME ACCORDING TO USBC CARD NO REARRANGING OF ORDER ALLOWED AT CHECK-IN	CAPT	Street Address City/State, Zip & Phone	National ID #	HLA 20-21	HLA 21-22	HLA 3/1/23	Email Address	GAME	SUMS	M (L)	M (H)	< (L)	> (H)
1. _____ HDCP _____ Lane _____		_____ Phone: _____ Zip: _____								1 7	1 8	2 1	2 1
2. _____ Comp# _____ Ent# _____		_____ Phone: _____ Zip: _____								9	0	0	1
1. _____ HDCP _____ Lane _____		_____ Phone: _____ Zip: _____								& B	& A	& B	& A
2. _____ Comp# _____ Ent# _____		_____ Phone: _____ Zip: _____								E	B	E	B
1. _____ HDCP _____ Lane _____		_____ Phone: _____ Zip: _____								L O	O V	L O	O V
2. _____ Comp# _____ Ent# _____		_____ Phone: _____ Zip: _____								W	E	W	E

Captain Information - Please Fill Out Completely

Name _____
 Address _____
 City, State, Zip _____
 Home Phone () _____ Cell Phone () _____

**Schedule of Events for the
 42nd Annual No-Tap Tournament**

FRIDAY
 April 21, 28 / May 5, 12, 19 - 7:30 PM

SATURDAY
 April 22, 29 / May 6, 13, 20
 9:30 AM, 12:30 PM, 4:30 PM, 7:30 PM

SUNDAY
 April 23, 30 / May 7, 14, 21
 9:30 AM, 12:30 PM & 4:30 PM

NOTES:
 No 4:30 PM Squad Sun., May 14

COMPLETE INFORMATION FOR CREDIT CARD

Name on Card: _____
 Type of Card: M/C Visa Discover Amex
 Card No.: _____
 Exp. Date: _____
 Signature: _____

As Team Captain, I have consulted each of the team members and hereby certify that the averages recorded are correct. Also, I have read all the rules on this entry blank and agree to abide by them. I further agree that should the Tournament Committee ascertain at any time that an average has been falsified and the correct average is not on the entry application, the team or individual shall forfeit all claims for prize money as well as their entry fee.

No Personal Checks Accepted after April 1, 2023.
 A 50% nonrefundable deposit is required by April 1, 2023.
 MAKE ALL CHECKS PAYABLE TO: IDLE HOURS SOUTH NO-TAP TOURNAMENT

