

## NORTHERN ONTARIO 5-PIN BOWLERS ASSOCIATION GRANDFATHER APPLICATION

Name:	
Street Address:	
City/Town:	
Postal Code:	
Telephone:	Preferred: [ ]
1) I wish to be	grandfathered into (select zone):
	☐ Gateway ☐ Cambrian North
2) Select which	ch currently applies to you (please check):
Previous St Charles Bowling Association Member: Previous Gateway Bowlers Association Member: New Bowler (have never bowled in an organized league):  3) Please describe why you are making this request:	
5) Flease des	Clibe willy you are making this request.
Signature of Bowler:	
For Zone president selected in question 1 to complete:	
I have verified question 2 d	of application (please check):
Zone President Signature:	
DATE SUBMITTED:	

Please forward completed application to the president of the Northern Ontario 5-Pin Bowlers' Association at <a href="mailto:no5pba.tim@gmail.com">no5pba.tim@gmail.com</a>

\*NEW BOWLERS REQUIRE NO5PBA EXECUTIVE APPROVAL BEFORE GRANDFATHERING CAN BE COMPLETED\*