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| **FORM A: ENTRY FORM** |

Please return this form even if you do not want to participate in the

2014 Asian Senior Championships

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| **FEDERATION** |  |
| CONFIRMATION |  |
| WE WANT TO PARTICIPATE (YES/NO) |  |

|  |  |
| --- | --- |
| **THE DELEGATION** |  |
| NO. OF MALE PLAYERS IN THE TEAM |  |
| NO. OF FEMALE PLAYERS IN THE TEAM |  |
| NO. OF OFFICIALS CONNECTED TO THEM |  |
| CONTACT INFORMATION |  |

|  |  |
| --- | --- |
| **CONTACT PERSON** |  |
| ADDRESS |  |
| PHONE |  |
| MOBILE |  |
| FAX |  |
| EMAIL |  |
| **The ultimate deadline of submitting this form is on 30th June 2014** |
| **HOST: PHILIPPINE SENIOR BOWLERS****26 Tagupo St. Cor. G. Araneta, Quezon City****EMAIL:** **steveerobles@me.com** **Website:** [**www.PhilippineSeniorBowlers.com**](http://www.PhilippineSeniorBowlers.com)**Tel: +632 6813195 Fax: +632 6813193 Mobile: +63 9175338109** |



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| **FORM B: HOTEL ROOM ACCOMMODATION FORM** |

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| **FEDERATION** |  |

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| **OFFICIAL HOTEL** |  |

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| --- | --- | --- | --- | --- |
| **NO. OF ROOMS** | **TYPE OF ROOM** | **EXTRA BED IF REQUIRED** | **ARRIVAL DATE** | **DEPARTURE DATE** |
|  |  |  |  |  |
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The official hotel for this championship is **The Linden Suites. Website:** [**www.lindensuites.com**](http://www.lindensuites.com)

Inclusions:

* Buffet breakfast based on registered guest
* Internet access based on registered guest

The following are the rate for room occupancy per night inclusive of taxes: Alloted Rooms

De Luxe Room (with kitchen) 2 Pax US$165 25

One Bedroom Suite (with living, kitchen, dining) 2 Pax US$175 50

Two Bedroom Suit (with living, kitchen, dining) 4 Pax US$255 10

 Extra per person price: US$60per person/night

 With buffet breakfast

 Complimentary use of health club, swimming pool and gym.

 Maximum room occupancy: De Luxe Room 3

 One Bed Room Suite 3

 Two Bed Room Suite 5

All bookings must be made by completing Forms B & C. Payment for accommodation must be received by 31st August to secure rooms. Special room rates will not be available for reservations made directly to the hotel and no shuttle service from/to airport will be provided if Federations stay in other hotel Likewise those staying in other hotels will be required to pay US$200/person. Payments shall be made directly to PSB via bank transfer.

**The ultimate deadline of submitting this form is on 31ST August 2014**

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| **FORM C: ROOM LIST WITH NAMES FORM** |

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| **FEDERATION** |  |

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| **YOUR DELEGATION DIVIDED AT THE HOTEL ROOMS** |
| **ROOM** | **TYPE** | **PLEASE TYPLE ALL NAMES REQUIRED IN EACH ROOM** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |
| 11 |  |  |
| 12 |  |  |

Type of rooms (field no.2 in the table above):

A= De Luxe Room (with kitchen) 2 Pax US$165

B= One Bedroom Suite (with living, kitchen, dining) 2 Pax US$175

C= Two Bedroom Suit (with living, kitchen, dining) 4 Pax US$255

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| **FORM D: ARRIVAL AND DEPARTURES FORM** |

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| **FEDERATION** |  |

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| **ARRIVAL INFORMATION** |
| **NO. OF PEOPLE** |  |
| **FROM WHICH CITY** |  |
| **DATE OF ARRIVAL** |  |
| **TIME OF ARRIVAL** |  |
| **CARRIER** |  |
| **FLIGHT NO.:** |  |

|  |  |
| --- | --- |
| **DEPARTURE INFORMATION** |  |
| **NO. OF PEOPLE** |  |
| **FROM WHICH CITY** |  |
| **DATE OF DEPARTURE** |  |
| **TIME OF DEPARTURE** |  |
| **CARRIER** |  |
| **FLIGHT NO.:** |  |

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| **FORM E: TEAM ROSTER** |

**PLEASE COPY IF YOU HAVE MORE TEAMS THAN LISTED BELOW**

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| --- | --- |
| **FEDERATION** |  |

**TEAM OFFICIALS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SURNAME** | **FIRST NAME** | **MI** | **GENDER** | **POSITION OR TITLE** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |

**BOWLERS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SURNAME** | **FIRST NAME** | **MI** | **GENDER** | **BOWLER DIVISION** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SURNAME** | **FIRST NAME** | **MI** | **GENDER** | **BOWLER DIVISION** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SURNAME** | **FIRST NAME** | **MI** | **GENDER** | **BOWLER DIVISION** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |

**The ultimate deadline of submitting this form is on 31th August 2014**

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EMAIL: steveerobles@me.com



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| **FORM F: SUPPORTERS** |

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| **FEDERATION** |  |

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| **SURNAME** | **FIRST NAME** | **MI** | **GENDER** |
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| **FORM G: BOWLER INFORMATION FORM** |

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| **FEDERATION** |  |

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| **NAME:** | **FAMILY NAME** | **FIRST NAME** |
|  |  |
| **PREFERED NAME (IF ANY):** |
| **GENDER** | **DATE OF BIRTH** | **PLACE OF BIRTH:****CITY** |
|  | **Dd / mm / yy** |
| **LEFT / RIGHT HANDED** | **YEARS OF BOWLING EXPERIENCE:** |
|  |  |

|  |  |  |
| --- | --- | --- |
| **HIGH GAME:** | **HIGH SERIES (3 GAMES):** | **(6 GAMES):** |
| **AVERAGE:** | **YEARS IN NATIONAL TEAM:** |

**MAJOR BOWLING ACHIEVEMENTS:**

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| **FORM H: BALL REGISTRATION FORM** |

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| **NAME OF PLAYER** | **GENDER** | **COUNTRY** | **DATE** |
|  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **BALL NAME** | **SERIAL NO.** | **EL** | **WB** | **HA** | **AC** | **RE** | **SE** |
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**EL**=ELIGIBLE / **WB**=WEIGHT AND BALANCE / **HA**=HARDNESS / **AC**=ACCEPTED /

**RE**=REJECTED / **SE**=SELECTED BY THE PLAYER

|  |
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| **PLAYER’S SIGNATURE** |
| **NOTES:** |
|  |

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| **THE BALL CHECK IS CARRIED OUT BY:** |

**This form can be submitted at the official ball registration day/s.**

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