



BOWL-A-THON

- ⌘ \$20 per bowler or \$100 per family/team (6 bowlers)
- ⌘ Shoe rental fee included
- ⌘ Maximum 6 bowlers per lane

Team Name: _____

Team Captain: _____
Last First

Name:	Primary Phone	Alternate Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

PAYMENT DETAILS

METHOD Visa MasterCard Cash Cheque Amount: \$ _____

NAME ON CARD _____

CARD NUMBER _____ EXPY _____

SIGNATURE _____ DATE _____

Waiver

On behalf of our team players, I, the undersigned, agree not to hold Classic Bowl and/or Bereaved Families of Ontario – Halton/Peel responsible in the event of any accidents or injuries that may occur during the Down Memory lane Bowl-A-Thon on Sunday, March 4th, 2012.

Team Captain Signature _____ Date _____

Please return this form by mail or fax to:

Bereaved Families of Ontario – Halton/Peel 33 City Centre Drive, Suite 610 Mississauga, ON L5B 2N5
Phone: 905-848-4337 Fax: 905-848-4338