

TEAMS

Buffaloe Lanes South
6701 Fayetteville Road
Raleigh, NC 27603
(919) 779-1888

Kristy Helms, General Manager



DOUBLES/SINGLES

Buffaloe Lanes North
5900 Oak Forest Road
Raleigh, NC 27616
(919) 876-5681

Frankie McDaniel, General Manager

**BUFFALOE LANES
RALEIGH, NORTH CAROLINA
WELCOMES**

"Laura K. McKettrick Memorial"

**12th ANNUAL LADIES EAST COAST CLASSIC
HANDICAP BOWLING TOURNAMENT**

June 27-28, July 11-12, 17-18-19, 2015

Entries Close Midnight May 16, 2015

All entries postmarked the first post office business day after the entry closing date shall be accepted

Entry fee per person per event..... \$25.00
Handicap All Events (Optional)..... \$ 2.00
Scratch All Events (Optional)..... \$ 3.00

Prize Fee Returned 100%

Additional Entry Forms available
on web site:
www.ladieseastcoastclassic.com

email questions/reservations to:
csenoch@knology.net

MAIL ENTRIES & FEES TO:

**LADIES EAST COAST CLASSIC
% CLYDE S. ENOCH
2211 VISCOUNT DR. NW
HUNTSVILLE, AL 35810
PHONE (256) 852-2524
FAX (256) 489-8048**

RESERVED ENTRIES DUE MARCH 31, 2015

CERTIFIED BY USBC

12th ANNUAL "LAURA K. McKETRICK" LADIES EAST COAST CLASSIC HANDICAP BOWLING TOURNAMENT

Team Event
Buffaloe Lanes South
6701 Fayetteville Road
Raleigh, NC 27603
(919) 779-1888

ENTRIES CLOSE

May 16, 2015

Doubles/Singles Event
Buffaloe Lanes North
5900 Oak Forest Road
Raleigh, NC 27616
(919) 876-5681

TEAMS DATES AND TIMES

Sat. June 27	8:00 AM - 12:00 PM - 4:00 PM
Sat. July 11, 18	8:00 AM - 12:00 PM - 4:00 PM
Sun. July 12, 19	8:00 AM - 12:00 PM - 4:00 PM
Fri July 17	6:00 PM

DOUBLES/SINGLES DATES AND TIMES

Sun. June 28	8:00 AM - 12:00 PM - 4:00 PM
Sat. July 11, 18	8:00 AM - 12:00 PM - 4:00 PM
Sun. July 12, 19	8:00 AM - 12:00 PM - 4:00 PM

TEAM NAME: _____

PLEASE PRINT

	Last Name	First Name	MI	USBC No.	Highest Avg 2013-2014
1.					
2.					
3.					
4.					

DOUBLES/SINGLES

PLEASE PRINT

	Last Name	First Name	MI	USBC No.	Highest Avg 2013-2014	All-Events	
						Hdcp	Scr.
1.							
2.							
1.							
2.							

Select Team Event	
Date Choice	Time Choice
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____

Select Doubles/Singles Event	
Date Choice	Time Choice
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____

Date Received: _____ **Entry Number:** _____

	Team	Doubles	Singles	Hdcp A/E	Scr A/E
Prize Fund	\$44.00	\$22.00	\$11.00	\$2.00	\$3.00
Lineage/Expense Fees	56.00	28.00	14.00		
Total	\$100.00	\$50.00	\$25.00	\$2.00	\$3.00

Event	Fee	Number	Total
Team	\$100.00		
Doubles	\$ 50.00		
Singles	\$ 25.00		
Hdcp A/E	\$ 2.00		
Scr A/E	\$ 3.00		
		Due	
		Amt. Recd.	
		Balance	

Team Captain: (Please Print)

Name: _____

Address: _____

City: _____ State _____ Zip: _____

Home Phone: (_____) _____ Business: (_____) _____

**PLEASE MAKE CHECKS
PAYABLE TO:
LADIES EAST COAST CLASSIC**

Average Verification By: Assoc. Sec'y _____ **Yearbook** _____