

# Greater St Paul Bowling Association Tournament AVERAGE VERIFICATION FORM

This is to verify that \_\_\_\_\_ ENTRY # \_\_\_\_\_  
(Bowler Name)

average as of \_\_\_\_\_ was \_\_\_\_\_ for \_\_\_\_\_ in the  
(Date) (Average) (Games)

\_\_\_\_\_ bowling at \_\_\_\_\_  
(League Name) (Establishment)

\_\_\_\_\_  
(Secretary Name) (PRINT Secretary Name) (Date)

\_\_\_\_\_  
(Address) (E-Mail)

\_\_\_\_\_  
(City) (State) (Zip) (Phone)

**Present this form with when you bowl OR Return Completed form within 10 days to:  
Greater St Paul Bowling Association  
61 W Little Canada Rd, Suite 300  
St Paul, MN 55117  
(651) 415-2828**

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