

MASTER BOWLERS' ASSOCIATION OF ONTARIO

RECORD OF PAYMENT - 2025 SPRING MASTER YOUTH ZONE ROLL OFF

ZONE DELEGATE: _____

ZONE:

PLEASE PRINT CLEARLY AND LIST ALL MASTER BOWLERS WHO PLAYED IN THIS EVENT:

NO.	RECEIVED FROM:	PAYMENT FOR:	AMT REC'D (\$100.00)	Cash (CA), Cheque (CH), VISA or M/C	Entry Mailed to Office
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

PLEASE TURN OVER

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RECORD OF PAYMENT - 2025 SPRING MASTER YOUTH ZONE ROLL OFF

NO.	RECEIVED FROM:	PAYMENT FOR:	AMT REC'D (\$100.00)	Cash (CA), Cheque (CH), VISA or M/C	Entry Mailed to Office
17					
18					
19					
20					

NO.	LIST OF NO-SHOWS (Full Name)	REASON (We like to know why a player did not attend. This may affect their status for the National Team)
1		
2		
3		

TOTAL CASH RECEIVED AND ENCLOSED:	
TOTAL CHEQUES RECEIVED AND ENCLOSED:	
TOTAL AMOUNT FOR VISA AND/OR MASTERCARD:	
TOTAL AMOUNT ENCLOSED: (Less VISA/Mastercard)	

Zone Delegates are requested to list all Master Bowlers who did not bowl in this tournament. If you know the reason, it should be marked.

PLEASE RETURN A COPY TO OFFICE WITH ALL CHEQUES AND/OR MONIES.

PLEASE DO NOT MAIL CASH THROUGH THE MAIL.

PLEASE TURN OVER