



MASTER BOWLERS' ASSOCIATION OF ONTARIO

181 Hartzel Road, PO Box 35005, St. Catharines, Ontario L2P 0C5

Telephone: (416) 426-7165 Fax: (416) 883-2342

Website: www.mbao.ca Email: office@mbao.ca

TO: ALL YBC PROGRAM DIRECTORS

FALL MASTER YOUTH TOURNAMENT

The Master Bowlers' Association of Ontario (MBAO) would like to advise you of the details for this season's Fall Master Youth Tournament. A general summary of the rules is as follows:

SCHEDULE OF EVENTS

In-House Qualifying Dates: Two (2) weeks: September 30 to October 13, 2023

Cost per Team: \$90.00

Average Date: Not required as qualifying for this event is based on scratch scores ONLY

For Zone Finals: Average as of October 13, 2023

Zone Roll-Off: Sunday, October 29, 2023 – (3 games)

Provincial Final Date: Sunday, March 24, 2024 - (3 games)

Location: Victoria Bowl
280 Victoria St. S
Kitchener, Ontario N2G 2C3
Telephone: (519) 745-3411

Registration Time: 9:00 am

Start Time: 9:30 am

NOTE: ONCE YOUR BOWLING CENTRE'S QUALIFYING ROUND HAS BEEN COMPLETED, ALL YBC PROGRAM DIRECTORS ARE REQUESTED TO SUBMIT THEIR QUALIFIERS TO THE MBAO ZONE DELEGATE AS WELL AS THE MBAO PROVINCIAL OFFICE BY FAX (416-883-2342) OR BY EMAIL TO OFFICE@MBAO.CA AS SOON AS POSSIBLE.

WE THANK YOU AND APPRECIATE YOUR ASSISTANCE WITH THIS EVENT

FALL MASTER YOUTH – GENERAL RULES

1. **Qualifying Age:** In order to be eligible to participate, all boys/girls **must not be older than 14 years of age as of December 31st, 2023**. All affiliated Master Bowlers on the active membership of the Association are automatically entered in the event.
2. Each bowling centre qualifies one Bantam and one Junior for each Master Bowler from **the centre (unless it is known prior to the qualifying round that a Master is unable to participate)**. This Fall Event will have a house qualifying round based on the YBC Bowlers scratch scores during the qualifying weeks to determine who is eligible to form the teams. A YBC Bantam, a YBC Junior and a Master Bowler are then joined together as a team. Usually an arbitrary draw is used, but this is left to the discretion of the centre. Once you run out of Bantams or Juniors, then the teams may be comprised of two Bantams and/or two Juniors. The Zone and Provincial Rounds are based on a POA Team Total.
3. House qualifying rounds consist of two (2) consecutive bowling weeks and are to be completed by **October 13, 2023**.
4. Qualifiers are selected on the basis of a **scratch format** using each of the two qualifying weeks **separately (NOT combined)**. That is, high scratch scores are posted from week one and then scores from week two establish the qualifiers in both the Bantam and Junior Divisions. As such, a youth bowler could bowl well one week and not the next and, with a high score from one of the weeks they would still qualify for the event.
5. Averages used for the qualifying round will not be required, however a YBC Player must have an established average with a minimum of nine (9) games by October 13, 2023, in order to be considered part of a team. If the YBC player does not have the nine (9) game requirement and was a member of your YBC league last season, Program Directors may use last year's ending average for these players.
6. Substitutes are allowed for the Master Bowlers by using an Unaffiliated Master Bowler who is willing to play. If your bowling centre has exhausted all your Bantams and Juniors, it is your responsibility to contact other centres in your zone to see if any Bantam or Junior bowlers are available. If YBC Players are still not available, Affiliated Master Bowlers' are allowed to travel to another zone where they can participate with YBC bowlers who are available in these other zones. Please contact both the Master Bowlers that don't have partners, the Zone Delegate and the MBAO office to advise us of the situation. Master Bowlers' are allowed to play without YBC Bowlers if none are available in order to complete their aggregate eligibility.
7. **Emergency replacement (Zone Round):** In the case of emergency, when a Master Bowler is unable to bowl on short notice or does not show up on the day of the event, that Master can be replaced by random draw from other Masters of their same bowling centre. If none are available, then the draw will include all Masters from their same zone who are in attendance. The selected Master will use their scores from the event so youth bowlers still have the opportunity to advance to Provincial round. The replacement Master would move on with that team. Same rule applies for a Youth Bowler.

8. **Format for the Zone Round:** The format for the event will be based on pins-over-average and, all bowlers (Bantam, Junior and Master Bowler) will bowl together in a **three (3) game team POA event**. Please confirm with the Zone Delegate that the roll-off information provided has not changed. You may also verify information on the MBAO website at www.mbao.ca.
9. **Average Verification – YBC Bowlers:** It is recommended that all YBC Program Directors ensure that the average sheets accompany their bowlers to the zone round of the Fall Master Youth tournament, so that all averages for the youths can be verified by the Zone Delegate prior to the event. **ALL WINNING TEAMS FROM THE ZONE ROUND WILL BE REQUIRED TO PROVIDE AVERAGE SHEETS FOR THE YOUTH BOWLERS TO THE MBAO OFFICE PRIOR TO THE PROVINCIAL CHAMPIONSHIPS.**
10. The winning team(s) in each MBAO Zone will advance to the Provincial Finals.
11. **Replacement for Provincial Round:** If a bowler on the winning team from the Zone Round is unable to attend the Provincial Round, the replacement bowler will come from the 2nd place team of the Zone Round. ie. If the Bantam is unable to attend the Provincial Round, the Bantam bowler from the 2nd place team at the Zone Round will now move up to bowl with the 1st place team at Provincials.
If a bowler qualifies for both Fall **and** Spring Master Youth Provincials and does not wish to bowl in both shifts on that same day, the bowler will remain on their team from the Fall Master Youth and can use a replacement bowler for their Spring Master Youth team.

DRESS CODE: THE DRESS CODE FOR YBC PLAYERS AT THIS EVENT WILL BE A YBC- IDENTIFIED BOWLING SHIRT OR A PLAIN GOLF SHIRT WITH A COLLAR.

NOTE: IT IS THE POLICY OF THE MASTER BOWLERS' ASSOCIATION OF ONTARIO TO REQUEST THAT ALL YBC PARTICIPANTS ADVANCING TO THE PROVINCIAL ROUNDS OF ANY MBAO EVENTS MUST COMPLETE A WAIVER FORM PRIOR TO BOWLING IN THE EVENT. ALL YBC QUALIFIERS WILL BE ISSUED THIS FORM AFTER THE LOCAL ZONE ROLL OFF.

If you have any questions regarding any part of this event, please do not hesitate to contact your local Zone Delegate or the MBAO Provincial Office either by phone at (416) 426-7165 or by e-mail at office@mbao.ca. Please log onto the MBAO website at www.mbao.ca to download electronic copies of this package on our YBC page.

Thanks for your co-operation.

Yours truly,

Andrea Disher
Director of Operations

MASTER BOWLERS' ASSOCIATION OF ONTARIO FALL MASTER YOUTH TOURNAMENT BOWLING CENTRE QUALIFYING ROUND

ZONE:

BOWLING CENTRE: _____

YBC DIRECTOR: _____

TELEPHONE #: _____

EMAIL: _____

QUALIFIERS (Based on Scratch Format)

BANTAMS

	AVERAGE
1st Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
2nd Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
3rd Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
4th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
5th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
6th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
7th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
8th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
9th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
10th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>

OF Bantams:



JUNIORS

	AVERAGE
1st Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
2nd Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
3rd Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
4th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
5th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
6th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
7th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
8th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
9th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>
10th Qualifier: _____	<input style="width: 60px; height: 20px;" type="text"/>

OF JUNIORS:



THIS FORM TO BE RETURNED TO THE MBAO OFFICE UPON COMPLETION OF THE QUALIFYING ROUNDS:
 181 Hartzel Road, PO Box 35005
 St. Catharines, Ontario, L2P 0C5
 Fax #: (416) 883-2342 or Email: office@mbao.ca

MASTER BOWLERS' ASSOCIATION OF ONTARIO

FALL MASTER YOUTH TOURNAMENT - TEAM REPORT FORM

ZONE:

BOWLING CENTRE: _____

OF BANTAMS:

YBC DIRECTOR: _____

OF JUNIORS:

TELEPHONE #: _____ EMAIL: _____ *(Please print clearly)*

Average

TEAM #1	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #2	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #3	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #4	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #5	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #6	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #7	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #8	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #9	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

Average

TEAM #10	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
Circle BTM or JNR	BTM/JNR: _____	<input style="width: 100%; height: 20px;" type="text"/>
	Master: _____	<input style="width: 100%; height: 20px;" type="text"/>

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MASTER BOWLERS' ASSOCIATION OF ONTARIO
RELEASE OF WAIVER AND MEDICAL FORM

2023/2024 FALL MASTER YOUTH TOURNAMENT

ACKNOWLEDGEMENT OF MEMBERSHIP
Medical Information

NAME OF BOWLER: _____

ADDRESS: _____

TELEPHONE #: () _____ YBC CENTRE: _____

ONTARIO HEALTH CARD NUMBER: _____

NEXT OF KIN: _____ TELEPHONE #: () _____

EMERGENCY CONTACT:

Name: _____ Telephone #: _____

Alternate: _____ Telephone#: _____

MEDICAL HISTORY

Does the bowler have any existing medical conditions? Please list.

Is the bowler currently taking any prescribed medication (s)? Please list.

Does the bowler have any allergies? Please list.

Regular Doctor: _____ Telephone #: _____

**I HEREBY GIVE MY CONSENT FOR EMERGENCY MEDICAL TREATMENT BY A LICENSED
MEDICAL PRACTITIONER, IF NECESSARY.**

(Signature of Parent or Guardian)

(Date)

(Print Name of Parent or Guardian)

(Witnessed by)

PLEASE TURN PAGE OVER

RELEASE & WAIVER

NAME OF BOWLER: _____

BOWLING CENTRE YBC AFFILIATION: _____

In consideration of the bowler as a member in the Corporation for the purpose of participation in the:

2023/2024 FALL MASTER YOUTH TOURNAMENT

The bowler and parent and/or guardian agrees to save harmless and keep indemnified the Corporation, MASTER BOWLERS' ASSOCIATION OF ONTARIO, its Officers, Directors and Members and their respective Agents, Officials, Servants and Representatives from and against all claims, actions or causes of action, costs, expenses, and demands including costs attendant thereto on a Solicitor and his or her own client basis, howsoever caused, arising out of or relating to any activity of the bowler taking part or being connected to any activity of the Corporation, MASTER BOWLERS' ASSOCIATION OF ONTARIO, whether caused by negligence of any of the parties hereto, or their respective Agents, Officials, Servants or Representatives; and it is understood and agreed that this agreement is to be binding on the Bowler, his or her heirs, Executors and assigns, and further that this release and waiver is not subrogated to any right included in any insurance policy held by, or for the undersigned.

By checking this box, You, the Bowler and Parent/Guardian authorize the Master Bowlers' Association of Ontario to post your Bowler's name and/or picture on our Social Media Sites, Website and in our Tournament Book.

Parent and/or Guardian Signature

Date

(Print) Parent or Guardian Name