MASTER BOWLERS' ASSOCIATION OF ONTARIO



Telephone: (416) 426-7165 Fax: (416) 883-2342 Website: www.mbao.ca

181 Hartzel Road, PO Box 35005, St. Catharines, Ontario L2P 0C5 Email: office@mbao.ca

TO: ALL YBC PROGRAM DIRECTORS

25th ANNUAL MASTER SENIOR TOURNAMENT

This letter is notification of the this season's MASTER SENIOR TOURNAMENT to be sponsored by NEB's Fun World, Oshawa, Ontario on Sunday, May 26, 2024. Again, this year, last year Juniors are eligible to bowl in this event. Enclosed, please find an entry form that is to be submitted to the MBAO Provincial Office that must include the Master Bowlers' name, the YBC bowlers name, address and the \$120.00 entry fee in order to guarantee a spot. A copy of the YBC bowler's average sheet must be submitted to the MBAO Provincial Office no later than April 15th, 2024.

ONLY Pre-Registrations will be accepted for this event!!! To be officially registered for the event, the MBAO Provincial Office must be in receipt of the completed entry form, names of the Master Bowler and YBC bowler, the completed waiver and the \$120.00 entry fee. The average sheet MUST be submitted to the Provincial Office immediately following the March 31, 2024 average deadline and no later than the April 15, 2024 deadline.

SCHEDULE OF EVENTS			
Average Date YBC bowler: (Avera	March 31, 2024 ige Sheet due April 15 th , 2024)		
Tournament Date:	Sunday, May 26, 2024		
Location:	NEB's Fun World 1300 Wilson Road North Oshawa, Ontario Tel: (905) 723-2631		
Registration Time: Start Time:	9:00 a.m. 10:00 a.m. (Sharp)		
Cost:	\$120.00 per team.		
NOTE: No entry fees will be accepted the day of the event. If you are paying by credit card, your entry will be processed within one month prior to the tournament.			

FORMAT FOR THIS EVENT: A six (6) game qualifying round using a "Scotch Doubles" format, that is, the Master and their YBC partner bowl alternate frames. Following the qualifying round, teams by descending score, will be slotted into Scratch and Pins-Over-Average (POA) sections. Team standings after the qualifying round will determine if they compete in POA or Scratch categories based on their ranking in each. If a team is ranked higher in POA than Scratch they will compete in the POA single knockout. Teams that tie in rankings will be placed in the Scratch category. Once the rankings have been done, the top teams in POA and Scratch teams will move to a Single Knockout Match Play round until a winner is determined. Six (6) games per team are guaranteed.

DRESS CODE – YBC Bowlers: That all YBC bowlers will wear a YBC-Identified bowling shirt or a plain golf shirt with a collar. "BLACK" pants/shorts (for men) and "BLACK" pants/skirts/skorts/shorts/capris (for the women). Cotton pants/skirts/shorts/capris will be permitted provided they are not faded, have no rips, tears or studs on them and have no slits up the side of them. Joggers, jeans, sweatpants, cargo pants, bike/exercise shorts are prohibited. No pants/slack/skirts/shorts/capris with external pockets on the sides will be accepted. Pants cannot have any sheer material.

Please canvas your YBC Seniors/last year Juniors and/or Masters for any interest in this event. Again, please remember that all your teams <u>must be registered with the</u> <u>MBAO Provincial Office in advance</u> in order to bowl. The maximum number of teams allowed for this event on Sunday will be 260 teams.

HOTEL RECOMMENDATIONS:

Durham College Residences 32 Commencement Drive – South Wing Oshawa Ontario L1G 8G3 (905) 728-8700

Comfort Inn 605 Bloor Street West Oshawa, Ontario L1J 5Y6 (905) 434-5000

If you have any questions regarding any part of this event, please do not hesitate to call Andrea Disher at (416) 426-7165 or by e-mail to <u>office@mbao.ca</u>. Please visit the MBAO website at <u>www.mbao.ca</u> to download electronic copies of this package from our YBC page.

Yours truly,

Andrea Disher Director of Operations

MASTER BOWLERS' ASSOCIATION OF ONTARIO

181 Hartzel Road, PO Box 35005, St. Catharines, Ontario L2P 0C5 Fax: 416-883-2342

25th ANNUAL MASTER SENIOR TOURNAMENT

"SPONSORED BY: NEB'S FUN WORLD, OSHAWA"

SUNDAY, MAY 26, 2024 REGISTRATION: 9:00 A.M. START: 10:00 A.M. - SHARP

ENTRY FEE: \$120.00 PER TEAM ((\$38.06 Lineage/Admin, \$77.00 Prize Money, \$4.94 HST)

ENTRY FEE AND YBC WAIVER MUST ACCOMPANY THIS FORM!!! AVERAGE SHEET AS OF MARCH 31, 2024 MUST BE SUBMITTED BY APRIL 15, 2024

ZONE:	BOWLING CENTRE:		
MASTER BOWLER:			
SENIOR BOWLER:			
SENIORS ADDRESS:	Street	Apt/Unit	
	City	Postal Code	
Average as of March 31, 2	2024 (Average Sheet attached):		
METHOD OF PAYMENT			
Please Indicate: Cheque {	} VISA { } Mastercard { } I	Etransfer { }	
Note: Entry Fee will be processed on credit card within a month prior to the event. Etransfers can be sent to office@mbao.ca. Please indicate Master name in message			
<u>Etransiers can be sent to</u>	onice@inbao.ca. Please indicate w	naster name in message	
Payment is enclosed in the	amount of \$		
Cardholder's Name: (Please Print)			
	E	xpiry Date:	
** NOTE: ENTRIES WI	LL BE PROCESSED ON A FIRST-COME,	FIRST-SERVE BASIS	
NO ENTRIES WILL BE GUARANTEED A SPOT UNLESS THE COMPLETED ENTRY FORM WITH BOTH PLAYERS NAMES, YBC AVERAGE, WAIVER, AND ENTRY FEE			
ARE SUBMITTED TO THE PROVINCIAL OFFICE **			

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

2024 MASTER SENIOR 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#: ()	
MEDICA	L HISTORY	
Does the bowler have any existing medical co	nditions? Please list.	
Is the bowler currently taking any prescribed m	nedication (s)? Please list.	
Does the bowler have any allergies? Please li	st.	

 Regular Doctor:

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:

2024 MASTER SENIOR EVENT

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.

Bowler's Signature (16 years or older)

Date

Parent and/or Guardian Signature

Date

(Print) Parent or Guardian Name