

MASTER BOWLERS' ASSOCIATION OF ONTARIO

RECORD OF PAYMENT - 2017 FALL MASTER YOUTH ZONE ROLL-OFF

ZONE DELEGATE: _____

ZONE:

PLEASE PRINT CLEARLY: (Please list all Master Bowlers who played in your Zone Round)

| NO. | RECEIVED FROM: | PAYMENT FOR: | AMT REC'D (\$80.00) | Cash (CA), Cheque (CH), VISA or M/C | Entry Mailed to Office |
|-----|----------------|--------------|------------------------|---|---------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
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| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
| 15 | | | | | |
| 16 | | | | | |

PLEASE TURN OVER

Please list all players by name including those who have prepaid

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|-----|----------------|--------------|------------------------|---|---------------------------|
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |
| 20 | | | | | |

| NO. | LIST OF NO-SHOWS (Full Name) | REASON (There must be a note to indicate why the individual was not at event.) |
|-----|---------------------------------|---|
| 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 SEND CASH THROUGH THE MAIL.**

PLEASE TURN OVER

Please list all players by name including those who have prepaid