CENTRAL OHIO BCA

2011 OHIO STATE BCA TEAM CHAMPIONSHIP TOURNAMENT

Open Team	Standard Entry fee Postmark By 3/18/11	Late Fee If Postmark 3/19/11-4/1/11
☐	$175	$200

Women's Team	Standard Entry fee Postmark By 3/18/11	Late Fee If Postmark 3/19/11-4/1/10
☐	$145	$170

League Name_____ League #_____

League Operator_____

Address_____

City_____ ____St/Pr_____ Zip_____

Country_____ Daytime Phone_____

Make Check or money order payable and mail entry to:
Central Ohio BCA
4201 S Hamilton Rd
Columbus Ohio 43125

Team Name

1. **Captain**_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

2. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

3 **Player**_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

4. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

5. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

6. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

7. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

8. Player_____ Phone Number_____

Address_____

City_____ St./Pr_____ Zip_____

Team Played On During League Season_____

Player ID #_____circle one Summer Fall Winter Spring

All refund requests must be submitted in writing and be received in the Central Ohio BCA office no later than March 30 2009 all refunds will be charged a $115.00 handling fee
I am a current member of the BCA pool league and not a professional player by definition of the BCA pool league. I have read and agree to abide by the rules and regulations implemented by the State tournament committee. Central Ohio BCA reserves the right to determine players eligibility and playing division, or refuse entry to anyone. State tournament director may refuse entry if fields are full. Size of field is subject to change at the sole discretion of the state tournament committee. Being a weekend competition it is understood that matches cold begin late into the evening and early the following day.

_____ _____

Team Captain Signature **Date** **League operator signature**