Special Olympics Bowling Entry Form – Deadline September 30th

Athlete's Name:_____

Age:_____ Sex:_____ School: _____

Teacher/Counselor:_____

Regular Lane:_____

Skill Level: _____ High _____ Medium _____ Low

Average: _____ (If you have any knowledge)

Bumper: _____
Recommended for younger or lower skilled bowlers

Ramp: _____ Wheelchair: _____Yes _____ No

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