



Fifth Annual Rotavision Bowlathon

TEAM APPLICATION FORM

Saturday, April 10, 2010

Albany Bowl, 540 San Pablo Ave., Albany

5:00 PM to 7:30 PM

Info: 510-928-3662 *or* bowlathon@albanycarotary.org

APPLICATION FORM INSTRUCTIONS:

1. Complete the information below, sign below, and fax to **510-291-8306** (preferred) or snail-mail to Albany Rotary Club, PO Box 6004, Albany, CA 94706, by **March 20** (or ASAP).
2. Submit \$75 entrance fee, payable by check *before March 27*, to Albany Rotary Club, PO Box 6004, Albany, CA, 94706.

I, the undersigned, hereby submit our Rotary Club to participate in the Fifth Annual Rotavision Bowlathon on April 10, 2010. This application will be accompanied by (or followed-up with) an entrance fee of \$75 **before March 27**.

PLEASE PRINT LEGIBLY

CLUB NAME: _____ (e.g., "Albany")

TEAM CAPTAIN'S NAME: _____

TEAM CAPTAIN'S PHONE: _____

TEAM CAPTAIN'S EMAIL: _____

Signature: _____ Date: _____