

**SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION INC.**

"Affiliate & Participate"

**APPLICATION FOR LIFE MEMBERSHIP**

CANDIDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ PHONE: \_\_\_\_\_

POSTAL \_\_\_\_\_

NOMINATED BY: \_\_\_\_\_

(Individual or Association)

QUALIFICATIONS: Please expand on the following guidelines in your presentation and attach to this application form

PROVINCIAL EXECUTIVE:  
POSITIONS HELD (Provincial Exec, Zone Director, Committees)  
YEARS OF SERVICE

LOCAL PARTICIPATION:  
EXECUTIVE POSITIONS:  
TOURNAMENTS:  
CHAIRPERSON (Local events, provincial events, committees)  
OFFICIAL (Judge of Play, scorekeeper, office, etc.)

NATIONAL PARTICIPATION  
EXECUTIVE POSITIONS  
TOURNAMENTS  
CHAIRPERSON (National events, committees, etc.)  
OFFICIAL (Judge of Play, scorekeeper, office, etc.)  
BOWLER (Which events and number of times)  
COACH (Which events and number of times)  
MANAGER (Which events and number of times)

COURSE CONDUCTOR  
JUDGE OF PLAY  
SCOREKEEPERS  
LEVEL I &/OR LEVEL II  
LANE CERTIFICATION

OTHER ACTIVITIES  
BOWLING SCHOOL  
YBC INVOLVEMENT  
MASTER BOWLERS

ALL APPLICATIONS TO BE SUBMITTED TO LIFE MEMBERSHIP COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION EXECUTIVE. APPLICATIONS FOR THE CURRENT YEAR MUST BE RECEIVED BY APRIL 1.

CHAIRPERSON: S5PBA 2nd Vice President

# SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION INC.

"Affiliate & Participate"

## ZONE EXECUTIVE LIST

<b>ZONE NAME:</b>	_____	<b>SEASON:</b>	_____
<b>ZONE DIRECTOR:</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____
<b>ZONE PRESIDENT:</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____
<b>VICE-PRESIDENT</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____
<b>SECRETARY:</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____
<b>TREASURER:</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____

Only one copy of the minutes, notices, forms, etc.... Will be mailed out to each Association, therefore it is important that you list the correct contact person.

### ALL INFORMATION TO BE SENT TO:

<b>CONTACT NAME:</b>	_____	PHONE:	_____ home
ADDRESS:	_____	PHONE:	_____ work
CITY/TOWN:	_____	FAX:	_____
POSTAL:	_____	EMAIL:	_____

**RETURN TO THE S.5 P.B.A OFFICE**

**#100 1805 - 8th Avenue N.**

**Regina, Sask**

**S4R 1E8**

# SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION INC.

"Affiliate & Participate"

## LOCAL ASSOCIATION EXECUTIVE LIST

**ASSOCIATION:** \_\_\_\_\_ **SEASON:** \_\_\_\_\_

**PRESIDENT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ home  
ADDRESS: \_\_\_\_\_ **PHONE:** \_\_\_\_\_ work  
CITY/TOWN: \_\_\_\_\_ **FAX:** \_\_\_\_\_  
POSTAL: \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**VICE-PRESIDENT** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ home  
ADDRESS: \_\_\_\_\_ **PHONE:** \_\_\_\_\_ work  
CITY/TOWN: \_\_\_\_\_ **FAX:** \_\_\_\_\_  
POSTAL: \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**SECRETARY:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ home  
ADDRESS: \_\_\_\_\_ **PHONE:** \_\_\_\_\_ work  
CITY/TOWN: \_\_\_\_\_ **FAX:** \_\_\_\_\_  
POSTAL: \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**TREASURER:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ home  
ADDRESS: \_\_\_\_\_ **PHONE:** \_\_\_\_\_ work  
CITY/TOWN: \_\_\_\_\_ **FAX:** \_\_\_\_\_  
POSTAL: \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Only one copy of the minutes, notices, forms, etc.... Will be mailed out to each Association,  
therefore it is important that you list the correct contact person.

### **ALL INFORMATION TO BE SENT TO:**

**CONTACT NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ home  
ADDRESS: \_\_\_\_\_ **PHONE:** \_\_\_\_\_ work  
CITY/TOWN: \_\_\_\_\_ **FAX:** \_\_\_\_\_  
POSTAL: \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**RETURN TO THE S.5 P.B.A OFFICE**  
**#100 1805 - 8th Avenue N.**  
**Regina, Sask S4R 1E8**

# SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION INC.

"Affiliate & Participate"

## SUPPLY ORDER

**ASSOCIATION NAME:** \_\_\_\_\_

<b>Description:</b>	<b>Quantity</b>	<b>Price</b>	<b>Total</b>
C5PBA Executive Handbook	on website: www.c5pba.ca		
Individual Average Sheets	on website: www.c5pba.ca		
Team Standing Sheets	on website: www.c5pba.ca		
C5PBA Rule Book	_____	5.00	_____
League Membership Registration Sheets	_____	N/C	_____
League Santion Certificates	_____	N/C	_____
S5PBA Operating Bylaws	_____	1.00	_____
Average Calculator Books	_____	1.00	_____
Scoreboards (large)	_____	2.00	_____
High Low Certificates	_____	N/C	_____
High Low Scoresheets	_____	N/C	_____
C5PBA Standards & Specs Manual	on website: www.c5pba.ca		_____
		Subtotal	
		GST	_____
		Total	_____

**Ship to:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Town: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone(s): \_\_\_\_\_  
Email: \_\_\_\_\_

<b>Office use only</b>	<b>Invoice #</b> _____	<b>Date Shipped</b> _____	<b>Initials</b> _____
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# SASKATCHEWAN 5 PIN BOWLERS' ASSOCIATION INC.

"Affiliate & Participate"

## AWARD ORDER FORM

**ASSOCIATION NAME:** \_\_\_\_\_

Pin	Quantity	Price	Total	Pin	Quantity	Price	Total
200	_____	0.78	_____	500	_____	0.78	_____
225	_____	0.78	_____	550	_____	0.78	_____
250	_____	0.78	_____	600	_____	0.78	_____
275	_____	0.78	_____	650	_____	0.78	_____
300	_____	0.78	_____	700	_____	0.78	_____
325	_____	0.78	_____	750	_____	0.78	_____
350	_____	0.78	_____	800	_____	0.78	_____
375	_____	0.78	_____	850	_____	0.78	_____
400	_____	0.78	_____	900	_____	0.78	_____
425	_____	0.78	_____	950	_____	0.78	_____
Blank Single	_____	0.78	_____	Blank Triple	_____	0.78	_____
Ace Spared	_____	0.78	_____	Center Pins	_____	1.50	_____
Headpin Spare	_____	0.78	_____	C5PBA Pins	_____	1.50	_____
Split Spared	_____	0.78	_____	Executive Bars	_____	1.00	_____
League Champ	_____	1.34	_____	Merit Bars	_____	1.00	_____
			Subtotal #1 .....	Sask 5 Pins	_____	3.00	_____
				400, 900 & 1000 Bars	_____	1.50	_____

Subtotal #2 .....

Subtotal #1 .....

**Ship to:** Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

GST \_\_\_\_\_

**TOTAL** \_\_\_\_\_

<b>Office use only</b>	<b>Invoice #</b>	<b>Date Shipped</b>	<b>Initials</b>
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# COACH PROFILE

# ELITE

## NOMINEE INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_  
CC# \_\_\_\_\_  
C5PBA# \_\_\_\_\_

## NOMINATED BY:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

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### 1 CERTIFICATION

Fully Certified (Theory, Technical and Practical) at: Level 1 \_\_\_\_\_ Level 2 \_\_\_\_\_

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### 2 COACHING in Prov 5PBA and C5PBA Tournaments (Youth Challenge, Open and events sanctioned by either Prov5PBA or C5PBA). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 3 COACHING in MBAC programs

Master/YBC tournament _____	Coach Provincial MBA Team _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____
Medallist at National Championships	Gold _____ Silver _____ Bronze _____

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### 4 COACHING in YBC Programs

Number of weeks actively coaching in the previous year \_\_\_\_\_

Coach of YBC team(s). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 5 INVOLVEMENT in other Coaching Activities.

NCCP Course conductor _____	Bowling School _____	Special Needs Coach _____
Coaching Seminars _____	Learn to Bowl Clinics _____	Other _____

# COACH PROFILE

# GRASS ROOTS

## NOMINEE INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_  
CC# \_\_\_\_\_  
C5PBA# \_\_\_\_\_

## NOMINATED BY:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

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### 1 CERTIFICATION

Fully Certified (Theory, Technical and Practical) at: Level 1 \_\_\_\_\_ Level 2 \_\_\_\_\_

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### 2 COACHING in Prov 5PBA and C5PBA Tournaments (Youth Challenge, Open and events sanctioned by either Prov5PBA or C5PBA). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 3 COACHING in MBAC programs

Master/YBC tournament \_\_\_\_\_ Coach Provincial MBA Team \_\_\_\_\_

Medallist at Provincial Championships Gold \_\_\_\_\_ Silver \_\_\_\_\_ Bronze \_\_\_\_\_

Medallist at National Championships Gold \_\_\_\_\_ Silver \_\_\_\_\_ Bronze \_\_\_\_\_

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### 4 COACHING in YBC Programs

Number of weeks actively coaching in the previous year \_\_\_\_\_

Coach of YBC team(s). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 5 INVOLVEMENT in other Coaching Activities.

NCCP Course conductor \_\_\_\_\_ Bowling School \_\_\_\_\_ Special Needs Coach \_\_\_\_\_

Coaching Seminars \_\_\_\_\_ Learn to Bowl Clinics \_\_\_\_\_ Other \_\_\_\_\_