



# Ontario 5 Pin Bowlers' Association

## 2021/2022 ONTARIO OPEN 2021/2022 ONTARIO SENIOR OPEN 5 PIN CHAMPIONSHIPS DECLARATION OF INTENT FORM

### DEADLINE DATE – OCTOBER 31, 2021

**BOWLER**       **COACH**       **BOTH**

To: \_\_\_\_\_, \_\_\_\_\_ Tournament Director  
(Name) (Zone)

I, \_\_\_\_\_ hereby state my intent to bowl in the Zone.  
(Print Name)

I am currently a registered member of an O5PBA sanctioned or affiliated league in the

\_\_\_\_\_ League at \_\_\_\_\_  
(League Name) (Bowling Centre Name)

in the above named Zone.

During the previous 2019-2020 season, I was a registered member of an O5PBA sanctioned or affiliated league in the

\_\_\_\_\_ League at \_\_\_\_\_  
(League Name) (Bowling Centre Name)

in the above named Zone.

#### DEFINITION OF LEAGUES:

**SANCTIONED** – A league will be registered and sanctioned providing that 75% of the participating bowlers purchase a membership card.

**AFFILIATED** – A league will be affiliated providing that at least ten (10) bowlers from the league purchase a membership card. Included with those bowlers must be the President, Secretary and Treasurer of the league.

**PLEASE NOTE:** All bowlers/coaches must purchase a membership card in the Zone they are declaring to bowl/coach in. It is the responsibility of the bowler/coach to make sure that all criteria for declaring are submitted to the O5PBA Office. All rules and regulations governing the Open declarations can be found on our website at [www.o5pba.ca](http://www.o5pba.ca).

I am attaching a copy of my current year (2021-22) average sheet confirming my participation in said league or in another league within that same Association. In the 2019/20 season I bowled a minimum of fifty (50) games in a sanctioned or affiliated league of the Zone I am declaring in, and I am listed on the o5pba.ca website Average Book for said league to verify my eligibility to declare.

The League Secretary has signed below to indicate that my current average sheet is a true copy. I understand that the cost of a Zone shirt may be at my own expense.

**Furthermore, I understand that it is my responsibility to ensure that this form is submitted to the Local Association Tournament Director by the deadline date established.**

\_\_\_\_\_  
(Signature)

I verify that the information for the above named person is true.

\_\_\_\_\_  
(League Secretary's Name)

\_\_\_\_\_  
(League Secretary's Signature)

\_\_\_\_\_  
(Date)

**A COACH WHO IS NOT ACTIVELY BOWLING AT ALL (NOT AN O5 MEMBER FROM ANY LEAGUE) WILL BE EXEMPT FROM THE 50-GAME CRITERIA, SO THEY CAN COACH IN A NON-RESIDENT ZONE.**

I declare that I am a certified coach who is not actively bowling at all and am not an O5 member in any league. I acknowledge that I am required to purchase a membership card in the Zone in which I am declaring to coach in.

\_\_\_\_\_  
(Signature)

I verify that the information for the above named person is true.

\_\_\_\_\_  
(Zone/DC President's Name)

\_\_\_\_\_  
(Zone/DC President's Signature)

\_\_\_\_\_  
(Date)

NAME: \_\_\_\_\_

MEMBERSHIP #: \_\_\_\_\_

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

CITY: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

TELEPHONE #: (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

