

BRITISH TENPIN BOWLING ASSOCIATION LEAGUE SANCTION APPLICATION FORM



LEAGUE SECRETARY: Submit original copy of this application with B.T.B.A dues to Head Office B.T.B.A. within 42 days after the start of the league schedule OR 1st September (whichever is later) in order to protect your high score claims. Sanction will continue until end of last stated schedules or 31 August, whichever is earlier. **ANY changes with the details of this form MUST be sent to BTBA Head Office in writing.**

LEAGUE NAME

CENTRE NAME LANES USED to

LEAGUE SCHEDULE

Please list all start and end dates for the year

LEAGUE BOWLS ON **Monday/Tuesday/Wednesday/Thursday/Friday/Saturday/Sunday**

Please delete as appropriate

FORMAT **Singles/Doubles/Trios/Fours/Fives** **Scratch/Handicap**

Please delete as appropriate If Handicap % of

NUMBER OF TEAMS Males Females Junior Total

Total players in league including substitutes

Was the league previously sanctioned? **Yes/No** if yes previous sanction no. /

In applying for B.T.B.A. Sanction, the officers and members agree to conduct the league in accordance with all laws, rules and regulations of the B.T.B.A. Rule 102 requires each league to elect a President, Vice President, Secretary and Treasurer. ONLY the Secretary and Treasurer offices may be combined.

PRESIDENTS Name: _____	Contact Telephone Number: _____
Address: _____	
B.T.B.A. No. _____	Officials Licence No. _____ <small>THIS MUST BE COMPLETED FOR ALL YBC LEAGUES</small>

VICE PRESIDENTS Name: _____	Contact Telephone Number: _____
Address: _____	
B.T.B.A. No. _____	Officials Licence No. _____ <small>THIS MUST BE COMPLETED FOR ALL YBC LEAGUES</small>

SECRETARY Name: _____	Contact Telephone Number: _____
Address: _____	
B.T.B.A. No. _____	Officials Licence No. _____ <small>THIS MUST BE COMPLETED FOR ALL YBC LEAGUES</small>

TREASURER Name: _____	Contact Telephone Number: _____
Address: _____	
B.T.B.A. No. _____	Officials Licence No. _____ <small>THIS MUST BE COMPLETED FOR ALL YBC LEAGUES</small>

PLEASE COMPLETE IN BLOCK CAPITALS

Team Captain		Team Captain		Team Captain	
1	<input type="text"/>	9	<input type="text"/>	17	<input type="text"/>
2	<input type="text"/>	10	<input type="text"/>	18	<input type="text"/>
3	<input type="text"/>	11	<input type="text"/>	19	<input type="text"/>
4	<input type="text"/>	12	<input type="text"/>	20	<input type="text"/>
5	<input type="text"/>	13	<input type="text"/>	21	<input type="text"/>
6	<input type="text"/>	14	<input type="text"/>	22	<input type="text"/>
7	<input type="text"/>	15	<input type="text"/>	23	<input type="text"/>
8	<input type="text"/>	16	<input type="text"/>	24	<input type="text"/>

**THE FOLLOWING IS TO BE COMPLETED BY YBC LEAGUES ONLY
FAILURE TO COMPLETE THIS SECTION MAY RESULT IN SANCTION NOT BEING GRANTED**

Please provide details of all persons involved with the instructing and assisting within your YBC

Name: _____	B.T.B.A. No. _____
Position within League: _____ (i.e. instructor, helper etc.,)	Licence No: _____

Name: _____	B.T.B.A. No. _____
Position within League: _____ (i.e. instructor, helper etc.,)	Licence No: _____

Name: _____	B.T.B.A. No. _____
Position within League: _____ (i.e. instructor, helper etc.,)	Licence No: _____

Name: _____	B.T.B.A. No. _____
Position within League: _____ (i.e. instructor, helper etc.,)	Licence No: _____

Total Number of B.T.B.A. Cards Required	
ADULT	<input type="text"/>
JUNIOR	<input type="text"/>
J/A	<input type="text"/>
Total Fees Remitted	<input type="text"/> £

HEAD OFFICE USE ONLY	
Date Rec.
Fees.
Checked.
Despatched

This application cannot be accepted unless the lanes being used are certified by the B.T.B.A. for the current season.