

**PROPOSAL TO HOST  
THE  
GEORGIA STATE BOWLING COUNCIL MIXED TOURNAMENT**

We ask that you consider our association as host for this tournament on the last two weekends of **June 2018**

NAME OF BOWLING CENTER: \_\_\_\_\_

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

(        )  
\_\_\_\_\_ Telephone                      \_\_\_\_\_ Number of Lanes                      \_\_\_\_\_ Amount of Lineage - 3 games

I, the Manager/Owner of the Bowling Center, do hereby agree that the lanes will be in tournament condition at the time of this tournament.

SIGNATURE OF MANAGER/OWNER \_\_\_\_\_ Date: \_\_\_\_\_

If your association is not merged, are the local WBA and BA Boards of Directors in agreement to host the Georgia State Bowling Council Mixed Tournament.                      Yes \_\_\_\_\_                      No \_\_\_\_\_

**N A M E S   O F   A S S O C I A T I O N S :**

\_\_\_\_\_  
Name of Local WBA Association

\_\_\_\_\_  
Name of Local BA Association

\_\_\_\_\_  
Local WBA President - Signature

\_\_\_\_\_  
Local BA President - Signature

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
Telephone: (        )

\_\_\_\_\_  
Telephone: (        )

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

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

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

We will need something in writing from hotel stating they will be able to guarantee us \_\_\_\_\_ (number of rooms)

at a price of \$ \_\_\_\_\_ for up to 4 people in a room, for the dates of the last two weekends in June.

\* **Note:** Before you sign this form, you should be certain that you fully understand the policies governing this tournament as stated by the Georgia State Bowling Council.

**MAIL COMPLETED FORM TO:**

\_\_\_\_\_  
**Linda Proctor**

\_\_\_\_\_  
**Tournament Manager**

\_\_\_\_\_  
**1960 Bradbury Road**

\_\_\_\_\_  
**Grantville, GA 30220**

**Telephone:** \_\_\_\_\_ **770-583-2008**

\* **Note:** Completed form must be mailed no later than Dec.1, 2016 to be considered for the tournament.