

MDUSBC SUBSTITUTE FORM

Indicate which Tournament this substitution is for: WOMEN_____ OPEN _____

Entry # _____ Team Date/Time _____ D/S Date/Time _____

Substitute's Name _____ USBC# _____

Address: _____ City: _____ Zip: _____

Will be Replacing: _____ In Team _____ Doubles _____ Singles _____

Please check how Averages was verified: IF USING AN INDIVIDUAL RECORD SHEET, PLEASE ATTACHED FORM

- Bowl.com Highest Average (21 games or more)# of games _____ Average _____ **OR**
- USBC composite average including averages with less than 21 games bowled: Average _____
- Individual Record Sheet for bowlers without either if the above:

Average as of date of bowling, minimum 21 games _____

Name of League _____

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