

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_____Averaage_____ **OR**
 - USBC composite average including averages with less than 21 games bowled: Average_____
 - Individual Record Sheet for bowlers without either if the aboue:
Average as of date of bowling, minimum 21 games_____
- Name of League_____

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