



42nd ANNUAL MINNESOTA STATE SENIOR BOWLING CHAMPIONSHIPS

Sponsored by the Minnesota State USBC
USBC Certified

SPARE TIME ENTERTAINMENT

333 SE 18th St
Owatonna, MN 55060
(507) 451-2524

Oct. 21 – Nov. 12, 2023

Sat – 11:00 AM & 2:00 PM

Sun – 10:30 AM & 1:30 PM

SINGLES EVENT

2 Divisions - Men & Women

6 Age Classes in Each Division

50-54, 55- 59, 60- 64, 65- 69, 70-74, 75 & Over

ENTRY FEE

(Per person)

Prize Fund \$13.00

Bowling \$12.00

Expenses \$5.00

Total \$30.00

Champions will receive
a Paid Entry into the
National Finals
and Travel Assistance

DOUBLES EVENT

Singles must be bowled before Doubles Competition.

An individual may compete in Two Doubles Events.
Once in the Mixed & Once in the Same Gender Division.
(Either the Men's or the Women's)

ENTRY FEE

(Per person)

Prize Fund \$13.00

Bowling \$12.00

Expenses \$5.00

Total \$30.00

Separate Prize Lists in each
Doubles Division

**Remit Doubles
Entries together**

To Guarantee Reservations – Entry Form and Fees MUST be Received by – Oct. 19, 2023

Entries received after that date will be processed on a “first come – first served” basis.

Final Entry Deadline – Nov. 12, 2023

For Reservations:

Call Tim Petersen

(651) 485-2086

pgolfertim@gmail.com

Mail Entries to:

Tim Petersen

3624 Violet Ave N

Brooklyn Ctr, MN. 55429

Make Checks payable to:

MN State USBC

\$25 Fee Charged on Returned
Checks ☐

FOR ALL BOWLERS – 50 & Over

SINGLES ENTRY PLEASE PRINT

Full Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Nat'l ID # _____

Highest Average 2021-22 or 2022 – 2023 Season _____
No average either year, use CURRENT average as of date of bowling _____

Birth Date _____

DIVISION - Check One

☐ Men's

☐ Women's

CLASS - Check One

☐ 50 - 54 ☐ 55 - 59

☐ 60 - 64 ☐ 65 - 69

☐ 70 - 74 ☐ 75 & Over

SINGLES - Date & Time Reserved _____

DOUBLES ENTRY

*Participants must have bowled the Singles Event
prior to their Doubles Competition.*

MEN' S / WOMEN'S Division

Partners Name _____

Date & Time Reserved _____

MIXED Division

Partners Name _____

Date & Time Reserved _____