

NEBRASKA
BOWLING PROPRIETORS' ASSOCIATION
ADULT-YOUTH 2018
TOURNAMENT
STATE FINALS FINANCIAL REPORT FORM

BOWLING CENTER: _____

CITY: _____

PLEASE LIST THE NUMBER OF ENTRIES THAT PARTICIPATED IN YOUR REGIONAL TOURNAMENT

PARENT/YOUTH

PARENT/TEEN

ADULT/YOUTH

ADULT/TEEN

TOTAL ENTRIES _____ x \$30.00 = _____

PLEASE REMIT THIS TOTAL AMOUNT. MAKE CHECKS PAYABLE TO THE NEBRASKA STATE BPA

EXPENSES

LINEAGE AND SCOREKEEPING: _____ TEAMS x \$20.00 = _____

POSTAGE: _____

OTHER EXPENSES: _____

TOTAL EXPENSES: _____

(PLEASE ATTACH RECEIPTS IF APPLICABLE)

UPON RECEIPT OF THIS COMPLETED FORM AND CHECK FOR ENTRY FEES THE NSBPA WILL PROMPTLY PAY THE HOST CENTER LINEAGE AND INCIDENTAL EXPENSES.

PROPRIETOR'S SIGNATURE _____

PLEASE MAIL REMITTANCE TO:

NICHOLAS BACKMAN
NSBPA ADULT YOUTH TOURNAMENT DIRECTOR
23271 AGEE LANE
WATERLOO, NE 68069
402.905.4774