

**Pre-/Post-Bowl Request  
Friday Night OUT Bowling League**

To be completed by the Team Captain making the request. Date of Request \_\_\_/\_\_\_/\_\_\_

Request is not granted until the form is completed and signed by both Team Captains, signed by the Postponement Committee members present at the time of the request, and returned to the League Secretary.

**PLEASE NOTE: CENTER REQUIRES AT LEAST 48 HOURS NOTICE FOR PRE/POST BOWL. NO AVAILABILITY AFTER 6 PM FRIDAYS, SATURDAYS and SUNDAYS.**

**Requesting Team:**

Team Number \_\_\_\_\_ Team Name \_\_\_\_\_

Scheduled Date \_\_\_/\_\_\_/\_\_\_

Rescheduled Date: \_\_\_/\_\_\_/\_\_\_ and Time \_\_\_:\_\_\_

Reason for request:

**Requesting Team Captain must notify the Control Desk of rescheduled time.**

Requesting Team Captain Signature \_\_\_\_\_

**Opposing Team:**

Team Number \_\_\_\_\_ Team Name \_\_\_\_\_

On which date will your team bowl? Scheduled or Rescheduled (circle one)

Opposing Team Captain Signature \_\_\_\_\_

**Postponement Committee Members only below:**

Postponement Committee Member Signature: \_\_\_\_\_

Postponement Committee Member Signature: \_\_\_\_\_

Postponement Committee Member Signature: \_\_\_\_\_

League Secretary Signature \_\_\_\_\_