

BOWLING EUROPEAN CORPORATIVE CHAMPIONSHIPS



ENTRY FORM (Please use BLOCK CAPITALS only)

COUNTRY ITALY

NAME OF COMPANY and TEAM NAME HERA S.P.A CIRCOLO GRUPPO HERA

BUSINESS ADDRESS VIALE BERTI PICHAT 2/4 40127 BOLOGNA

NAME, ADDRESS AND TELEPHONE NUMBER OF THE PERSON RESPONSIBLE FOR THE TEAM (TEAM CAPTAIN OR TEAM MANAGER) DONINI FABRIZIO VIA FERRARESE 156/29 40128 BOLOGNA
CELL.39 3737207793

EMAIL ADDRESS: fabrizio.donini64@alice.it

FOUR PERSON TEAM EVENT	PREFERRED BOWLING SQUAD (A, B, C ETC):			Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1					
2					
3					
4					
5 (RESERVE)					

LADIES DOUBLES TEAM EVENT	PREFERRED BOWLING SQUAD (A, B, C ETC):			Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1		F			
2		F			
3 (RESERVE)		F			

MIXED DOUBLES TEAM EVENT	PREFERRED BOWLING SQUAD (A, B, C ETC):			Family?	Senior?
Notes: Shifts preference hours 09.00		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1 RITA	ANGELINI	F	AA8293		
2 ETTORE	FABBRI	M	AB1936		

MENS DOUBLES TEAM EVENT	PREFERRED BOWLING SQUAD (A, B, C ETC):			Family?	Senior?
Notes: Shifts preference hours 08.00		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1 PIETRO	MARTELOZZO	M	AA2674		
2 FABRIZIO	DONINI	M	AA2619		

SECTION TO BE COMPLETED BY COUNTRY REPRESENTATIVE
FACTS SHOWN ABOVE ARE CORRECT TO THE BEST OF MY KNOWLEDGE

Date 18/02/2023 Country Representative [Signature]
Signature [Signature] **F.I.S.G.B. FEDERAZIONE ITALIANA SPORT BOWLING**

Important: Entry Form MUST be typewritten or it will be rejected by your Country Representative.