

## **ALL ABILITIES BOWLS COMPETITION**

Agency Name: \_\_\_\_\_

Participants Name	<b>*Grading 1 -- 5</b>					Comments
	1	2	3	4	5	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

**Grading: 1 = Limited bowling ability** ←————→ **5 High level of bowling ability**

Please list all staff, carers or coaches attending for catering purposes

Please complete and return to Rhonda -Mallee Sports Assembly (Ph 0427780109) before 30<sup>th</sup> June 2015 Email: [rhonda@malleesportsassembly.org.au](mailto:rhonda@malleesportsassembly.org.au)

IF AFTER 30<sup>th</sup> JUNE 2015 please send to - Matt Berry-Wimmera Regional Sports Assembly (Ph 53824599) by 3rd Sept 2015 Email: [mattb@wrsa.org.au](mailto:mattb@wrsa.org.au)