



# 2024 BOWL-A-RAMA TEAM REGISTRATION

\* **REQUIRED** fields



TEAM CAPTAIN NAME*		<input type="checkbox"/> Adult \$35 <input type="checkbox"/> Child \$20
BOWLER #2 - NAME		<input type="checkbox"/> Adult \$35 <input type="checkbox"/> Child \$20
BOWLER #3 - NAME		<input type="checkbox"/> Adult \$35 <input type="checkbox"/> Child \$20
BOWLER #4 - NAME		<input type="checkbox"/> Adult \$35 <input type="checkbox"/> Child \$20
BOWLER #5 - NAME		<input type="checkbox"/> Adult \$35 <input type="checkbox"/> Child \$20
TEAM NAME*		
COMPANY NAME		
ADDRESS / STREET*		
CITY/STATE/ZIP*		
PHONE*		
EMAIL*		
ADMISSION	<b>\$35/person; \$20/child (age 15 &amp; under)</b>	
METHOD OF PAYMENT	<input type="checkbox"/> Check (make payable to Special Kids Special Families) <input type="checkbox"/> Credit Card (online via SKSF website) <input type="checkbox"/> Credit Card (call into SKSF at 719-447-8983 x13)  There is NOT a pay at the door option. All payment MUST be made prior to the event to reserve lane.	<b>TOTAL AMOUNT DUE</b>  \$ _____

FAX this form to: (719) 447-9482 or  
 MAIL or DROP OFF to: SKSF/Attn: Bowl-A-Rama; 1915 Aerotech Drive, Ste. 100, Colorado Springs, CO 80916

Once form is received, a CONFIRMATION will be sent to above email address.  
 THANK YOU for participating in this event!

**QUESTIONS? [sksf@sksfcolorado.org](mailto:sksf@sksfcolorado.org) or 719-447-8983**