LEAGUE NAME_____ **CENTER**_____ **DATE**_____**TIME**_____

SECRETARY____ **EMAIL ADDRESS**_____ **PHONE#**_____

	Amount	Group Men & Women In Indiv Groups		**Scores**						**If paying for another league**
	Paid	**Name**	**Average**	**Game 1**	**Game 2**	**Game 3**	**SERIES**			**League Name**
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