



WA Under 23 Youth Team 09 Trials For 2010 National Youth Team Challenge

ROLL-OFF DATES AND VENUES

Saturday 25 July 2009 (6 games) check in 9.45am Melville
2009 TBAL Registration Cards to be sighted at this time

Sunday 26 July 2009 (6 games) check in 9.00am Cannington

There is no qualifying for this Event

Bowlers are requested to post their entry form and deposit or full fee by 17 July 2009.

NOMINATIONS and CORRESPONDENCE to be sent to:
TBAWA Youth Team Trials
PO BOX 397, GREENWOOD WA 6924

TOURNAMENT DIRECTORS:
Bev Pendreigh and MTBA
& Ken Thompson and CTBA

TBAL Accreditation No: A09/0178

TBAWA Acknowledges the Support of DSR



RULES & REQUIREMENTS – YOUTH TRIAL ROLL OFF AND NATIONAL CHALLENGE

1. ELIGIBILITY

Nominees are to satisfy TBAWA General Committee of their eligibility and:

- 1.1. Must hold a 2009 TBAL Bowler Registration Card through a TBAL licensed WA Centre Association at a TBAL registered bowling centre. Card to be sighted on Day 1.
- 1.2. Must **not have reached twenty three (23)** years of age on the 1 January 2010. (No lower limit. Please submit a photocopy of your Birth Certificate or extract as proof of age.)
- 1.3. Must have bowled at least **8 weeks and a minimum of 24 games** of competition in a TBAL Accredited League in Western Australia during 2009, prior to close of nominations. **A copy of a league standing sheet at 30 June 2009 MUST BE PROVIDED with the completed entry form.** (League games completed as pre or post bowled do not count towards the number of games bowled.)
- 1.4. Must **agree to sign and abide by** the TBAL Code of Ethics and abide by the Youth Challenge Rules-Regulations-Requirements Version 4.2 (or latest revision).
- 1.5. Must, unless granted exemption under Rule 6(f) of the TBAL Youth Team rules, be a **resident of Western Australia** as at the close of nominations on 25 July 2009.

2. NOMINATIONS

All bowlers nominating for the 2010 Western Australia Youth Team Trials do by their nomination and signing of it agree to accept the following conditions:

- 2.1. Nominations can be accepted at first venue.
- 2.2. Nominations must be completed on the official 2010 WA Youth Team Trials Nomination Form.
- 2.3. Nominations can be mailed to PO Box 397, GREENWOOD WA 6924 prior to the closure time, with a nomination deposit
- 2.4. **\$80.00 nomination deposit or full nomination fee** of \$160.00 must accompany the form.
- 2.5. The TBAWA General Committee will decide any matter not covered in the Entry Form and such decision is final.
- 2.6. TBAWA General Committee reserves the right to reject the nomination of any bowler for justifiable cause.

3. FORMAT FOR TRIAL ROLL OFF

- 3.1. Nominees will bowl in a **12 game roll-off** which will be conducted **over two (2) days** at the two (2) centres listed – 6 games each day, with **lane change after each game**.
- 3.2. Bowlers participating in the roll-off will compete in separate Male and Female Team format, **where possible**. Lane draw will **depend on numbers**.

4. SELECTION

- 4.1 The male and female teams of four **will be the first three (3)** with highest scratch pinfall after 12 games, **along with one (1) selected male and female**. A 1-game roll off will decide any tie for third place. (The next ranking Bowlers will form the Reserves list.)
- 4.2 The teams will represent Western Australia at the 2010 National Youth Team Challenge at **Werribee, Victoria 9 to 14 January 2010**.
- 4.3 In the case of a withdrawal from the teams of four, **selection of the replacing member** will be made by the selection panel of Manager, Coach and EDO from those reserves who have best displayed a positive attitude towards training and team participation.

5. RESPONSIBILITIES OF TEAM MEMBERS AFTER SELECTION

- 5.1. Agree to wear the **official uniform** as specified by TBAWA.
- 5.2. **Attend** all meetings and training sessions specified for the WA Youth Teams by the Coach/Manager. Training details, scheduled by the respective Team Coaches, will be provided to Team members following the trials.
- 5.3. At their own expense **enter the All Events** in the 2009 WA State Championships.



- 5.4. Understand that all bowlers **MUST** participate in fundraising activities **OR** pay an equivalent sum to cover such amounts raised by the other Team Members.
- 5.5. Agree to adhere to the **Fees Payable Schedule** enclosed on this Entry Form.
- 5.6. **Stay with the Team** at accommodation provided from the time they arrive in the host state (**Victoria**) until after the National Youth Team Challenge 9 to 14 January 2010.
- 5.7. Any bowler who fails to complete any stage of the format and schedule will **NOT be entitled to a refund** of any money paid.
- 5.8. Any bowler who withdraws from the Teams after 1 November 2009 will only be entitled to a refund of personal contributions made (less purchase price of airfare). No fundraising money will be refunded to an individual. A Team-member who withdraws from a Team on or after 1 August 2009 will not be entitled to any refund of any money paid up to then.
- 5.9. A replacement bowler will be responsible for any shortfall in any money due.
- 5.10. **Failure to comply** may result in removal from the Team. Exemptions may be granted for debilitating injuries or illness, on production of a medical certificate, or National Team Service. All applications for exemption from any requirement or part thereof must be **in writing** and will be reviewed by TBAWA General Committee on an individual basis.

6. DRESS CODE

- 6.1. Dress code for the trials will be in accordance with Rule 14 of the TBAL Youth Rules. Males will wear dress trousers. Females may wear slacks, dress shorts, skirts or skorts. All bowlers must wear an acceptable recognised bowling shirt, but no tank tops, denim, jeans, track pants, torn clothing or shirts with another person's name are permitted.
- 6.2. For any queries on the dress code, please contact a Tournament Director.

7. UNIFORMS, TRAVEL AND ACCOMMODATION

- 7.1. TBAWA will co-ordinate travel and accommodation arrangements for the Teams competing in the 2010 Youth Teams Challenge **at Werribee, Vic.**
- 7.2. Each Team member will receive a uniform consisting of one (1) shirt and one (1) jacket (if needed). Bowler is required, at own expense, to supply Black Trousers (Male) and Black Skirt/Dress shorts (Female).
- 7.3. All other personal expenses are to be met by the Team Member.
- 7.4. While travelling as a Team, members must understand that their commitment and priority is to the Western Australian Teams and the performance of the Teams as a whole.

8. FEES PAYABLE SCHEDULE

- 8.1. It is estimated that the minimum amount payable is \$1900.
- 8.2. Team fundraising and sponsorships could reduce this amount. Bowlers will be issued with a receipt for all money paid.
- 8.3. Payment Schedule:
 - \$600 payable on Sunday 26 July 2009
 - \$300 payable by Sunday 30 August 2009
 - \$350 payable by Sunday 27 September 2009
 - \$350 payable by Sunday 25 October 2009
 - \$300 payable by Sunday 29 November 2009
- 8.4. Balance of account: payable by Sunday 14 December 2009

9. MEDICAL ARRANGEMENTS

- 9.1. Team members who have a pre-existing or on-going illness or infirmity must supply a Medical Certificate (at bowler's expense) in order to participate in the preparation and training of the Teams.
- 9.2. Any Team member injured or suffering from a previous injury prior to the Teams departure will be required to furnish a Medical Certificate (at own expense) to prove their fitness to travel.
- 9.3. Failure to produce any certificate within one week, or other specified time, will render the bowler liable to be replaced.



TENPIN BOWLING ASSOCIATION OF WA

http://tbawa.dyndns.info

ABN 76 919 866 379

WA YOUTH TEAM TRIALS
NATIONAL YOUTH TEAM CHALLENGE 2010

OFFICIAL NOMINATION FORM

IMPORTANT: YOU MUST READ AND UNDERSTAND

Team Coach/s and Manager/s (Team Officials) are appointed by TBAWA General Committee. Bowlers must follow the directives given by Team Officials at all times. The aims and objectives of the Team will not be jeopardised through the acts of individual Team members. Failure by any Team member to adhere to the Code of Ethics will result in one (1) written warning. Any further violation will result in their immediate removal and departure from the Team at their own expense.

I hereby give my permission for the Team Officials to seek any medical attention which they deem necessary should an incident occur where I am unable to make an informed decision for myself or should I be under 18. I agree to pay all medical expenses incurred on my behalf.

Name: _____ DOB ____/____/____

Address: _____

Post Code: _____

Telephone: (H) _____ (W) _____ (Mob) _____

E-mail: _____

Registration No: _____ Centre: _____

Team nominating for: (Male/Female) _____

Please indicate which payment you are submitting with this form:

Nomination Fee Deposit \$80.00 _____ Full Nomination Fee \$160.00 _____

All nominations and correspondence to be sent to:

TBAWA Youth Team Trials
PO Box 397 GREENWOOD WA 6924

I, and if being a minor, my parent/s and/or guardian/s for and on behalf of myself, acknowledge that during all such times as I am present on the premises of any bowling centre or other location or included in any activity external to those premises which is organised, approved or endorsed by Tenpin Bowling Association of Western Australia (TBAWA) as an activity for me to take part in, both my property and person shall be at my own risk and I will not hold TBAWA liable for any personal injury or loss of property which may arise from the negligence or otherwise action of TBAWA its servants, agents, independent contractors, voluntary workers, other users of the premises or participants in the activities or spectators or other parties providing services through TBAWA or otherwise in those premises.

I, _____ submit this nomination and agree to accept at all times the authority of the Tournament Directors and Team Officials appointed by TBAWA General Committee and agree to abide by the Tenpin Bowling Australia Limited Code of Ethics.

Signature of Nominee _____ & Guardian _____ Date _____
If under 18

OFFICE USE ONLY

Nomination received _____ Received _____ Signature _____



Department of Sport and Recreation

