



MINNESOTA SHOPPING CENTER ASSOCIATION

# MSCA's Bowling Bonanza!



MINNESOTA SHOPPING CENTER ASSOCIATION

Thursday, April 25, 2019 3:00-6:00 pm

3:00 registration • 3:30-5:30 two games & pizza buffet • 5:30-6:00 awards

Southtown Lanes • 7941 Southtown Center • Bloomington, MN 55431 • 952-888-9248

**Registration Forms Due April 12, 2019**

Price includes two games, pizza buffet & networking! Cash bar available.

**Team of 4 bowlers: \$220**

Team name (optional): \_\_\_\_\_

1) Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Strike Pot: \$10/entry

2) Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Strike Pot: \$10/entry

3) Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Strike Pot: \$10/entry

4) Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Strike Pot: \$10/entry

**One bowler: \$55**

**We'll match you up with a team to play on!**

Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

Strike Pot: \$10/entry

**Not bowling: \$25**

**Join us for the pizza buffet and networking!**

Name \_\_\_\_\_

Company \_\_\_\_\_

Email \_\_\_\_\_

**PRIZES AWARDED FOR  
CREATIVE TEAM ATTIRE!**

## Bowling Event Title Sponsor – Doran Companies!

**DORAN**  
COMPANIES

**STRIKE POT – \$10 TO ENTER**  
**Win a \$250 Total Wine Gift Card**

**DORAN**  
COMPANIES

**Strike Pot Rules:** Every time you roll a strike, you enter your name into a drawing. After the games, a strike off will take place. The person whose name is drawn will have one chance to roll a strike. Names will continue to be drawn until a strike is rolled and someone wins.

**Lane Sponsor \$60 (deadline: March 29<sup>th</sup>)**

**If you would like to sponsor a lane, you will receive exposure for your company.**

- Number of lanes to sponsor \_\_\_\_\_ (First come, first serve; Formal contract to follow)

**Would you like to donate any funds to MSCA's 2019 Philanthropic Charity of Choice – Cornerstone?**

Amount \$ \_\_\_\_\_

**Return Payment Made Payable to MSCA** Amount \$ \_\_\_\_\_ Check # \_\_\_\_\_  Visa/Mastercard

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_ Signature: \_\_\_\_\_