

APPLICATION FOR BOWLING AID APPROVAL



SEND BY EMAIL: office@bowlsalberta.com or MAIL: BA, 11759 Groat Road, Edmonton, AB, T5M 3K6

BCB Conditions of Play: Appendix G. 1 Use of Bowling Delivery Aids

Bowls Canada Boulingrin recognizes that the primary purpose of a bowling delivery aid is to enable a person with a physical disability to play the sport of bowls. This regulation covers the use of a delivery aid (e.g. support, bowling arm, etc.) for delivering a jack and a bowl. For all Canadian Championships, and for provincial playdowns leading towards a national championship, a player must seek approval of their specific bowling delivery aid. Devices such as bowling arms that are produced by a recognized manufacturer, and used with no customized modifications, will typically be approved. Manufacturers are encouraged to provide a sample device for testing by BCB to assist with the approval process. For most Canadian Championships, and for provincial playdowns leading towards a national championship, a bowler must be able to produce a medical certificate that attests to their physical disability.

		APPLICANT'S DI	ETAILS		
Full Name:					
City / Postal Code	ə:				
Club / City					
Email:					
CONDITIONS OF APPLICATION					
The need to use this device is:		Permanent	Tempora	Temporary untilInsert date /year	
The need to use the device is necessary because of:					
Include a Medical Certificate / Doctor's letter with this Application.					
DECLARATION					
I confirm that the Bowling Aid for which I am seeking approval to use and will be using to play in provincial playdowns and					
possible National	events is currently appro	oved for use by Bowls Ca	nada Boulingrin.		
Signed:			Dated:		
		12220111 271121	D LIMBIDE		
APPROVAL BY HEAD UMPIRE					
Head umpire:			T T		
Signed:			Dated:		
FFICE USE ONLY					
Processed by		Date:	Sent to BCB:		