

**Society of Philippine Electrotechnical Constructors & Suppliers, Inc.**

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**SPECS FUN GAME BOWLING TOURNAMENT**

1. **TOURNAMENT DETAILS**

Date : October 26, 2019

Registration : 12:30 Noon

Time : 1:00 P. M.

Venue : 3rd Floor, Superbowl, Makati Cinema Square

 Pasong Tamo, Makati City

Format : 3 – Man Team/4 Games

1. **Sponsorship:** Php 5,000.00

 This will entitle your company to:

1. One Playing Team; Free of Charge
2. Company name/logo inclusion in the streamer which will be displayed

at the bowling center during the tournament.

1. Company name/logo inclusion in the event’s program.
2. Distribution of promotional materials during the tournament.
3. Acknowledgement in the SPECS Magazine.
4. **TEAM Registration**: Php 2,200.00/Team
5. **LEGIBILITY**

All Members, its spouses, friends and partner industries are welcome to join.

1. **DEFINITION OF GAMES**
2. **No-Tap Bowling** – refers to a game that when a player knocks Out nine (9) pins on the first ball in any frame, it is automatically considered a strike. A regular strike is also considered strike.
3. **Regular Bowling** – refers to a game player on regular bowling.
4. **FORMAT**

A team shall be composed of three (3) players. Any number combination of male and female players may compose a team. Each team shall play a four (4) – game series.

 Game 1 - No-Tap Bowling

 Game 2 - No-Tap Bowling

 Game 3 - Regular Bowling

 Game 4 - Regular Bowling

Registration is ongoing. For further details, please call the Secretariat through Telephone/ Fascimile No/s 413-0994 or you may email your inquiries at specsphils.68@gmail.com

✄

Yes, we are joining the 38th SPECS Fun Game Bowling Tournament

with the following line-up of bowlers:

Name: 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Handicapped: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Handicapped: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Handicapped: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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