Pathfinder Bible Experience

Registration Area ◉ Conference ○ Union ○

Team Name _____

(This is what you want to see on the certificate.)

Conference _____

District or Area _____

Event Date _____

Event Location _____

	Name	Grade (5 – 10)
Player		
Player		
Player		
Player		
Player		
Player		
Alternate Player		
Coach		# Pins

Club Director ☐ or Coach ☐ Name _____

Email _____

(Email address of the person(s) who will receive PBE event notices, confirmations, updates, and etc.)

Registration deadline: January 12. Please, submit form to: aclemencia@mac.com

For Coordinator Use:

Coordinator _____ Notes_____

☐ SOI Signed ☐ VPR Signed _____TPP _____HGH _____SCR _____PCT _____PLC _____BK