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Pool League Entry Form

BAR/LOCATION NAME

TEAM NAME

\$40/Team

2025 – 2026

SEASON

LEAGUE NAME

Iron River/Brule Area – BLIP Open

LEAGUE NIGHT

Thursday

Please attach completed form to Kro Bar's BLIP clip-board.

CAPTAIN: NAME: _____
ADDRESS: _____
CITY: _____ ZIP: _____
HOME#:(_____) WORK#: _____
Email address: _____

PLAYER: NAME: _____
ADDRESS: _____
CITY: _____ ZIP: _____
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Email address: _____

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