

41st Annual **ALL STAR TRIO** 32nd Annual **ALL STAR SOLO**

ALL STAR BOWL - 726 N SHORTRIDGE RD, INDIANAPOLIS, IN 46219

TEAM ENTRY FEE:

\$150.00

TEAM AVG MAX:

675

TEAM PRIZE RATIO:

1:8

EARLY BIRD ADDED PRIZE

1st WEEKEND ONLY - \$750.00

HIGH TEAM SCORE W/HDCP

SOLO ENTRY FEE:

\$50.00

SOLO PRIZE RATIO:

1:8

(CAN ONLY CASH ONCE)

SAME DAY ENTRY SUBJECT TO WALK IN FEES

\$15.00 PER TEAM EVENT

\$5.00 PER SOLO EVENT

SATURDAY - February 21, February 28, March 7, March 14, March 21, March 28

Squad Times: 12:15pm & 2:45pm

SUNDAY - February 22, March 1, March 8, March 15, March 22, March 29

Squad Times: 11:00am & 1:30pm

TOURNAMENT RULES

Eligibility & Entry

- All bowlers must be USBC-certified and comply with USBC rules.
- Teams are limited to a maximum combined average of 675. 10 PIN RULE IS IN EFFECT.
- Open to Men, Women and Mixed 3-Person Teams
- Bowlers must use their highest certified league average from the 2024-2025 season, based on 21+ games. College and Junior League averages are not accepted.
- House condition averages take precedence over USBC-converted averages. If only a converted average (e.g., sport or challenge) is available, the highest 21+ game converted average will be used.
- If no 2024-2025 average is available, bowlers can use their highest average from the past 5 years (21+ games). If none exists, the current 2025-2026 average can be used, if 21+ games have been bowled by the registration date. Proof of average is required at registration. If no qualifying average is available, the bowler will bowl scratch at 225.
- All Events Scores calculated on bowlers 1st Team Event Score and 1st Singles Event Score. Separate Men & Women Prize Lists. Prize ratio for All Events is 1:16.

USBC CERTIFIED

Average Verification

- As per USBC Rule #319a, bowlers must submit their highest average from the previous season (21+ games). If their current average (21+ games) is 10 or more pins higher, the current average must be used.
- The tournament manager may re-rate averages before competition. If not accepted, a full refund will be issued.

Handicap Calculation

- Trio Team Event: 80% of 225, each individual handicaps added together
- Singles Events: 80% of 225 scratch, up to 240 pins per person per series.

Lane Assignments & Participation

- Teams can participate unlimited times in the team event but can cash only once. A new team has at least one new member.
- Bowlers may participate up to 4 times in the solo event but can cash only once. The first solo score and first trio team score will count toward all-events standings.
- Trios and Solos can be assigned to the same pair of lanes.

Prizes

- Prizes will be based on handicap scores. 100% of the prize fees will be returned to the respective events or division.

Verification & Prize Eligibility

- All teams and individuals are subject to verification, which must be completed by April 15, 2026.

Emergency Cancellations

- In case of tournament termination due to factors beyond All Star Trio's control (e.g., war, national emergency, fire, natural disaster), prizes will be prorated based on the number of entrants who have bowled.

TRIO ENTRY FEE: \$150.00 PER TEAM

\$165.00 PER TEAM if not prepaid at least one day before bowling
 \$98.00 Prize Fund, \$30.60 Lineage, \$21.40 Tournament Expenses

SOLO ENTRY FEE: \$50.00 PER ENTRY

\$55.00 PER BOWLER if not prepaid at least one day before bowling
 \$31.00 Prize Fund, \$10.20 Lineage, \$8.80 Tournament Expenses

ALL EVENTS INCLUDED IN TEAM ENTRY**ENTRY FEE MUST ACCOMPANY ENTRY BLANK****ENTRY DEADLINE: SUNDAY, MARCH 29, 2026**

\$50.00 FREE ENTRY FEE FOR SQUAD ORGANIZER OF TEN (10) OR MORE TEAMS

OFFICIAL USE ONLY

	SQUAD	LANE #
TEAM		
SOLO		
SOLO		
SOLO		

MAKE PAYMENT PAYABLE TO: H2M MANAGEMENT, 7149 KARST CT, INDIANAPOLIS, IN 46221

CAPTAIN'S NAME: _____	ADDRESS: _____
CITY/STATE/ZIP: _____	PHONE #: _____
EMAIL: _____	TEAM NAME: _____

PREFERRED DATE:	TRIO: _____ 1st Date _____ Time _____	TRIO: _____ 2nd Date _____ Time _____
	SOLO: _____ 1st Date _____ Time _____	SOLO: _____ 2nd Date _____ Time _____

PLEASE WRITE LEGIBLY - USBC# REQUIRED OR ENTRY FORM WILL NOT BE ACCEPTED

1	NAME: _____	EMAIL: _____	EVENT	CIRCLE FEES	AMOUNT PAID
	ADDRESS: _____	CITY/STATE/ZIP: _____			
	USBC# _____	AVERAGE: _____ / _____ MALE OR FEMALE			
	2024/2025 BOOK	FEB 1ST 2026 IF 10 PINS OR HIGHER			

2	NAME: _____	EMAIL: _____	EVENT	CIRCLE FEES	AMOUNT PAID
	ADDRESS: _____	CITY/STATE/ZIP: _____			
	USBC# _____	AVERAGE: _____ / _____ MALE OR FEMALE			
	2024/2025 BOOK	FEB 1ST 2026 IF 10 PINS OR HIGHER			

3	NAME: _____	EMAIL: _____	EVENT	CIRCLE FEES	AMOUNT PAID
	ADDRESS: _____	CITY/STATE/ZIP: _____			
	USBC# _____	AVERAGE: _____ / _____ MALE OR FEMALE			
	2024/2025 BOOK	FEB 1ST 2026 IF 10 PINS OR HIGHER			

TOTAL PAID: _____

RESERVATIONS AREN'T CONFIRMED WITHOUT PAYMENT