CHALLENGE TO BOWLS FORM

PLEASE PRINT:

Name of Controlling Body:	Event:
Club where challenge is lodged:	
Date:	Time:
Bowls	
Make:	Serial Number:
Reason for challenge:	
Challenger	
Name:	Club:
Address:	
Phone:	Email:
User or Owner of Bowls under Challenge	
Name:	Club:
Address:	
Phone:	Email:
Accredited National Umpire	
Name:	
National Umpire Number:	Phone:
Umpire's Signature:	

I _____agree to abide by the decision of the official Bowls Licensed Tester. I hereby lodge the sum of $150 as required under the 'Laws of the Sport of Bowls Crystal Mark 4th Edition', April 2023 (Revised May 2023).
Signature of Challenger:

I _____ ☐ wish ☐ do not wish
to be present at the table test when my bowls are tested. *(Please tick appropriate box)*

Signature of Owner or User:

To be retained by Club Sec./Controlling Body. Copy to be sent to Bowls Australia and relevant STA.

Bowls Australia
PO Box 52
Northcote VIC 3070

Telephone: (03) 9480 7100
Facsimile: (03) 9495 0194
admin@bowls.com.au
www.bowls.com.au