



USWCA 5th SUPER SENIOR WOMEN'S NATIONAL BONSPIEL ENTRY FORM

The Rice Lake Curling Club in Rice Lake, Wisconsin will host "Women With Brooms" on **Tuesday, October 28-Thursday October 30, 2025**. This 3 day event will allow 20-24 teams to participate. This is a 6-end bonspiel on 4 sheets of ice with a 3 game guarantee. Finals will be on Thursday afternoon – end time dependent upon number of teams. **ELIGIBILITY:** All participants must have reached the age of 65 before January 1, 2026 and have paid USWCA dues for 2024-25 season. Members-At- Large are eligible to enter (USWCA dues paid by bonspiel entry). Form on USWCA website under Super Senior. **ENTER:** As an Individual and you will be placed on a team with curlers from other regions. OR as a **COMPOSITE TEAM** only two players from same club allowed. Other 2 players must be from a different region. The goal is to play with other curlers from different regions. **ENTRY FEE:** Each individual entry must include a check for \$75 which is refundable if not drawn. Fee includes curling, 1 dinner, and lite breakfast and snacks. Lunch will be available for separate fee.

ACCOMMODATIONS: Available Sunday 10/26-Friday 10/31 AmericInn \$95 + tax per night- includes breakfast. Microtel Inn & Suites- \$95/\$89 + tax Holiday Inn \$121 +tax/night Hotel info with bonspiel acceptance-Sept.

AIRPORT: Nearest large airport is St. Paul MN- 2 hours away.

PLEASE MAKE CHECKS PAYABLE to Rice Lake Curling Club. COMPLETE ENTRY MUST BE RECEIVED BY August 15, 2025. Draw for teams will take place within 2 weeks of deadline and you will be notified of your entry.

Mail Entry to Kim Susens 514 Lisbeth Rd Wausau, WI 54401.

INDIVIDUAL ENTRY NAME _____

Address _____

Email _____ Phone _____ Birth Date _____

Club _____ Curling Position Choice 1st _____ 2nd _____ Any _____

If entering with another curler- Name _____ Email _____

Club _____ Curling Position Choice 1st _____ 2nd _____ Any _____

Do you want to curl on same team? _____ Will you come only if this player comes? _____

Dietary Restrictions: _____

COMPOSITE TEAM (only 2 players from same club and 2 others from a different region)

Skip Name _____ Club _____

Address _____ Email _____

Phone _____ Birth Date _____

Vice Name _____ Club _____

Address _____ Email _____

Phone _____ Birth Date _____

Second Name _____ Club _____

Address _____

Email _____ Phone _____ Birth Date _____

LeadName _____ Club _____

Address _____

Email _____ Phone _____ Birth Date _____

List Dietary restrictions- Name and specify what: _____