

QUALIFICATIONS OF CANDIDATE

Please fill in all information requested

CANDIDATE

Name _____ Telephone No. _____

Address _____ USBC # _____

City _____ State _____ Zip Code _____

Candidate for: VOLUNTEER ()

DIRECTOR ()

Active bowler this current season? Yes () No ()

Bowling in an unsanctioned league? Yes () No ()

If more room is needed for information below, use other side.

Member of: (List all leagues)

Offices Held: (List County, State or League)

Present: (Now Serving) _____

Past: _____

List Committees served on and indicate if Chairman:(County, State or League)

List additional information, such as attendance at NATIONAL conventions and workshops, State meetings and workshops and County meetings and workshops.

Professional or Business background and experience. (If any)

Date _____ Signature _____