

WESTCHESTER COUNTY USBC ASSOCIATION

Hall of Fame Application

MERITORIOUS SERVICE CATEGORY

A Nominee shall have been a certified member of the Westchester County USBC for at least **fifteen (15)** years and USBC for at least **twenty (20)** years, which includes membership in the predecessor associations of both the local (WCBA/WBA) and national associations (ABC/WIBC/YABA), unless for reasons of health these qualifications could not be met.

Complete this form and send copies by **January 31st** to the:

WESTCHESTER COUNTY USBC HALL OF FAME/SRA COMMITTEE CHAIR
c/o the WCUSBC Association Manager
133 Carrollwood Dr Tarrytown, NY 10591-5207

Applications are kept on file for **two (2)** years and may be updated annually. After **two** years, a **new** application must be submitted.

Name of Nominee _____

Street _____ Phone No. _____

City _____ Zip Code _____

E-Mail _____

Past Association, If Any _____ No. Years _____

Submitted by _____ Title _____

Street _____ Phone No. _____

City _____ Zip Code _____

E-Mail _____ Date Submitted _____

For office use only:

Date Received: _____

Nominee #: _____

WESTCHESTER COUNTY USBC ASSOCIATION

Hall of Fame Application

MERITORIOUS SERVICE CATEGORY

Name of Nominee _____

Indicate the number of years and dates to which you served as President, Vice-President, Sergeant-at-Arms, Association Manager, Secretary, Treasurer, Director, Committee Chair or Tournament Director for National, State and/or Westchester Adult or Youth bowling associations, Bowling Councils or 500, 600, 700 clubs, or related honors or services:

NATIONAL (Officer/Director):

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

STATE (Officer/Director):

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

WESTCHESTER (Officer/Director):

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

Office _____ Total years _____ Dates _____

COMMITTEE CHAIR or TOURNAMENT DIRECTOR (indicate National/State/Westchester):

Committee _____ Total years _____ Dates _____

Committee _____ Total years _____ Dates _____

Committee _____ Total years _____ Dates _____

Committee _____ Total years _____ Dates _____

Committee _____ Total years _____ Dates _____

WESTCHESTER COUNTY USBC ASSOCIATION

Hall of Fame Application

MERITORIOUS SERVICE CATEGORY

BOWLING COUNCILS or CLUBS (indicate association):

Council/Club _____	Total years _____	Dates _____
Council/Club _____	Total years _____	Dates _____
Council/Club _____	Total years _____	Dates _____
Council/Club _____	Total years _____	Dates _____
Council/Club _____	Total years _____	Dates _____
Council/Club _____	Total years _____	Dates _____

SPECIAL HONORS (Hall of Fame, Bowler of the Year, etc):

ADDITIONAL INFORMATION: (Include bowling experience—leagues, awards, etc.)

Thank you for supporting the WESTCHESTER COUNTY USBC Awards Program