



P.O. Box 18747
Spokane, WA 99208
Web: www.spokaneusbc.com
E-mail: scusbc@spokaneUSBC.com

SCUSBC HALL OF FAME BOWLER NOMINATION/BIOGRAPHY FORM

Nomination Requirements:

1. Completion of this Bowler Nomination / Biography Form in full, with two (2) signatures supporting the nomination.
2. Completed Bowler Nomination / Biography Form must be returned to Spokane County USBC Association Manager by February 1 in order to be considered for election to the Hall of Fame during the current year. (Nominations received after that date will be carried over to the following year.)

Categories for Hall of Fame Induction:

1. Living Adult
2. Posthumous (deceased)
3. Superior Performance
4. Meritorious Service

Eligibility Requirements:

A candidate for the Spokane County USBC Association Hall of Fame must meet the following criteria:

1. Must be a minimum age of forty (40) as of July 1st of year nominated. (Waived for posthumous category)
2. Must have minimum of ten (10) years participation in Spokane County Association Tournaments, or in case of Meritorious Service – ten (10) or more years of service.
3. Must have been an adult member of certifying or governing body of bowling for a minimum of ten (10) years. (Waived for posthumous category)



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_____ (Date of Nomination) _____ (Nominee's Last Name, First Name)

Categories being nominated for:

___ Superior Performance ___ Living
___ Meritorious Service ___ Posthumous

NAME: _____ USBC Card # _____, (if applicable)

DATE OF BIRTH: _____ PHONE NO.: _____

ADDRESS: _____

COMPETED IN
LEAGUE BOWLING

From: _____ To: _____

From: _____ To: _____

LOCAL ASSOCIATION
MEMBER

From: _____ To: _____

From: _____ To: _____

(Name of Local Association(s))

PERSONAL PARTICIPATION, ACHIEVEMENTS AND CONTRIBUTIONS TO COMMUNITY AND SPORT OF BOWLING

1. TOURNAMENT COMPETITION:

(List years competed and any achievements. Attach additional sheets, if needed)

SPOKANE COUNTY USBC TOURNAMENT
(includes SBA and SWBA): _____

WASH STATE TOURNAMENT: _____

WASH STATE MIXED TOURNAMENT: _____

WASH STATE SENIOR TOURNAMENT: _____

NATIONAL TOURNAMENT: _____



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(Nominee's Last Name, First Name)

2. BOWLING ACHIEVEMENTS:

HIGH AVERAGES: _____
HIGH SERIES: _____
HIGH GAMES: _____
HONOR SCORES: _____

3. OFFICES HELD: *(Bowling)*

NATIONAL: _____
STATE: _____
LOCAL: _____
LEAGUE: _____

4. SPECIAL SERVICE TO:

ASSOCIATIONS AND BOWLERS _____
SPORT OF BOWLING _____

5. CIVIC ACTIVITIES & SERVICE:

FELLOWSHIP CLUBS / LODGES: _____
COMMUNITY SERVICE CLUBS: _____
OTHER AFFILIATIONS, ETC: _____

6. YOUTH BOWLING:

BOWLING: _____
COACH: _____
REGISTERED VOLUNTEER (RVP): _____

7. RECOMMENDED BY:

(Requires two (2) Signatures)

1. _____
2. _____

Please attach additional Bio Sheet(s), if needed.



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_____ / _____
(Nominee's Last Name, First Name)

HALL OF FAME - APPLICATION PROCESSING

DATE APPLICATION RECEIVED / BY WHOM: _____ / _____

DATE RECEIVED BY HALL OF FAME COMMITTEE: _____

DATE ACKNOWLEDGEMENT OF APPLICATION
RECEIVED IS SENT TO SUBMITTERS: _____

ACTION TAKEN BY HALL OF FAME COMMITTEE:
(i.e. verified criteria, recommended to board, returned
to submitter with reason and resubmission process)

DATE ELECTED BY BOARD TO HALL OF FAME: _____

DATE INDUCTED INTO HALL OF FAME: _____

Records:

If elected and inducted:

_____ Original application retained by Association Manager

_____ Copy retained by Hall of Fame Committee

If not elected and inducted:

_____ Original returned to submitter

_____ Copy retained by Hall of Fame Committee