



MESA COUNTY USBC NOMINATION FORM HALL OF FAME MERITORIOUS SERVICE

SUBMIT BY JANUARY 1

To be eligible for consideration in the Mesa County USBC Hall of fame a nominee must be at least 45 years of age prior to selection, have been a present or former member of the Mesa County USBC for at least 15 years (not necessarily consecutively) and must have contributed through dedicated service to the general welfare and progress of the game of bowling in Mesa County.

DATE: _____

NAME OF NOMINEE: _____
LAST NAME FIRST NAME MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP

NOMINEE'S BIRTH DATE: _____ (MO/DAY/YR) PHONE (____) _____
(Include Area Code)

NEAREST RELATIVE: _____
NAME RELATIONSHIP

ADDRESS: _____
STREET CITY STATE ZIP

PLEASE SUBMIT THIS COMPLETE FORM NO LATER THAN JANUARY 1. USE ADDITIONAL SHEETS IF MORE SPACE IS NEEDED. MAIL COMPLETED APPLICATION TO:

President
Mesa County USBC
299 Gill Creek Ct
Grand Junction, CO 81503

Service Accomplishments (attach additional pages if necessary)

Mesa County USBC:

Number of years a Mesa County USBC member: _____
Number of local tournaments competed in: _____
Number of Annual Mesa County USBC meetings attended: _____

List service within the Mesa County USBC (number of years on each):

Board of Directors: _____
Committees: _____
League Offices Held: _____
Youth: _____
Volunteer for other local activities: _____

Colorado State USBC:

Number of State Tournaments competed in: _____
Number of State Delegates Meetings attended: _____

List service within the Colorado State USBC (number of years on each):

Board of Directors: _____
Committees: _____
Youth: _____
Volunteer for other state activities: _____

National USBC:

Number of years a USBC/WIBC/ABC member: _____
Number of National Tournaments competed in: _____
Number of National Conventions attended as a delegate: _____

List service with USBC/WIBC/ABC and other organizations (YABA, NWBW, TNBA, 600 or 700 Clubs, Pioneer Club, Committees, etc) (number of years on each): _____

Other Bowling related accomplishments:

Personal Achievements:

High Game: _____ High Three-Game Series: _____ High Average: _____

(Print Name) Submitted by: _____

Address: _____
 Street City State ZIP

Phone (____) _____
 (Include Area Code)

Signature: _____ Date: _____