NEW YORK STATE USBC

Service to Bowling/Community Award Application

The Service to Bowling/Community Award is presented to a NYS USBC member (active or inactive) who has voluntarily given **ten** (10) or more years of outstanding service to the sport of bowling/service to the community.

Complete both pages of this form. Send copies by **December 1**st to the NYS USBC Awards Committee members listed below.

Applications are kept on file for *three* (3) years and may be updated annually. After *three* years, a *new* application must be submitted.

Name of Applicant	
Street	Phone No
City	Zip Code
Local Association	
Number of Years a NYS USBC Member	er

Submitted by	Title
Street	Phone No
City	Zip Code
Local Association	Date Submitted
Use add	ditional page(s), if required.
	Date Received

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Plea	ase indicate whether you have held the following positions and the length of service:
1.	Community Service Office (church, charity, hospital, etc)? Yes No
	How Many? How Long?
2.	Local Association Office? Yes No
	How Many? How Long?
3.	State Association Office? Yes No
	How Many? How Long?
4.	Office in Bowling Clubs/Organizations (500, 600, 700, NWBW, WASA)? Yes No
	How Many? How Long?
5.	League Offices? Yes No
	How Many? How Long
6.	Local Tournament Office? Yes No
	How Many?
7.	State Tournament Office? Yes No
	How Many?
8.	Community Service Awards? Yes No
	How Many (Describe)?
9.	Local Delegate to State Annual Meeting? Yes No
	How Many Times?
10.	Local Delegate to National Convention? Yes No
	How Many Times?

Name of Applicant _____

Thank you for supporting the NYS USBC Recognition Program.

2020-21 Awards Committee Members:

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