

NOMINATION FOR OHIO USBC WBA HALL OF FAME

Award for Superior Performance
 in the game of American Tenpins

Basic Qualifications: This award is presented to a present or past Ohio USBC WBA (Ohio WBA) member in recognition of her outstanding bowling performance over a period of years.

She must have been a USBC (WIBC) and Ohio USBC WBA (Ohio WBA) member in good standing for at least fifteen (15) years. In case of death, this requirement could be waived. She must have won at least one Ohio WBA Championship Tournament title or Ohio WBA Queens title.

Date _____

Miss
 Name of Nominee Mrs. _____
 First Maiden Last

Current Address City State Zip Phone No. E-Mail Address
 Birthdate _____ Living _____ Deceased _____
 Date Year

Member of _____ Number of years a USBC (WIBC) member _____
 Local Association

Number of years Ohio USBC WBA (Ohio WBA) member _____

Is nominee still actively bowling? Yes _____ No _____

| | | |
|-------------------------------|---------|-------|
| Highest average (s) attained: | Average | Year |
| | _____ | _____ |
| | _____ | _____ |

| | | |
|------------------------|--------|-------|
| Highest Series bowled: | Series | Year |
| | _____ | _____ |
| | _____ | _____ |

| | | |
|-------------------------|-------|-------|
| Highest Game(s) bowled: | Game | Year |
| | _____ | _____ |
| | _____ | _____ |

| | | |
|---------------------------------------|-------|------|
| Ohio (state) tournament title(s) won: | Score | Year |
|---------------------------------------|-------|------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Number of years participation in state tournament: _____

| Local Association tournament title(s) won: | Score | Year |
|--|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Performance in other tournaments:

National:

Other:

Other special awards or honors in the bowling field:

A picture would be helpful, if available, for the Hall of Fame Board to review.

Attach a separate sheet for additional information.

MAIL NOT LATER THAN OCTOBER 1 TO:

Ohio USBC WBA Association Manager
P.O. Box 368
Enon, Ohio 45323

TWO SIGNATURES REQUIRED

Submitted by: _____

Signature

Address

City

State

Zip

Area Code

Phone No.

E-Mail Address

Signature

Address

City

State

Zip