

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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