Nomination for Michigan State USBC Hall of Fame Meritorious Service

Any Information the informant considers pertinent for candidate's inclusion in the Hall of Fame should be attached on a separate sheet of paper

Address: City: State Zip: State Address: State Association Officer and/or Director: Indicate Chair State Association Member: Indicate Chair or Member No. Years State Association Committee Chair State Sta	Name of Nominee:					
Member of which Local Association			First	La		
Member of which Local Association						
learest Relative:Relationship:	irthdate (month/date	/year):/	/Phone: _			
lumber of years served as a Michigan State USBC Association Officer and/or Director: Positions Held No. Years Positions Member: Indicate Chair or Member No. Years Member No. Years Committee Chair No. Years Member No. Years tate Tournament Squad Organizer (10 Teams or more): Number of Times: Positions served as USBC Officer, Director or Committee Member: (Indicate number of years served on all committee Positions Held No. Years Positions	Member of which Loca	l Association			Number of	f Years
Positions Held No. Years Positions Held No. Years Positions Held No. Years Committee Chair No. Years Member No. Years Committee Chair No. Years Positions Held No. Years Positions H	learest Relative:			Relationship:		
State Association Committees served on, either as a State Board Member or as a Local Association Member: Indicate Chair or Member Committee Chair No. Years Member No. Years Committee No. Years Member No. Years Committee No. Years Member No. Years Committee Number of Times: Positions served as USBC Officer, Director or Committee Member: (Indicate number of years served on all committee Positions Held No. Years Pos	Address:		City:		State	Zip:
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Positions Held No. Years Positions Held No. Years Positions Held No. Years		Committee	Chai	Ind	licate Chair or Memb Member 	No. Years
		Committee	Chai	Ind	licate Chair or Memb Member 	No. Years
Number of years served as a Local Association Officer and/or Director	 State Tournament Squ	Committee	Chai	No. Years No. Years No. Years	licate Chair or Member Member	No. Years
Number of years served as a Local Association Officer and/or Director	etate Tournament Squ Positions served as US	Committee ad Organizer (10 BC Officer, Direct	Chai	No. Years No. Years Number of Times:	Member Member ———————————————————————————————————	No. Years No. Years all committees)
Number of years served as a Local Association Officer and/or Director	etate Tournament Squ Positions served as US	Committee ad Organizer (10 BC Officer, Direct	Chai	No. Years No. Years Number of Times:	Member Member ———————————————————————————————————	No. Years No. Years all committees)
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	Positions served as US Positions Held	Committee and Organizer (10 BC Officer, Direct No. Years ——— ———————————————————————————————	Chai	No. Years Number of Times: No. Years No. Years Director	Member Member er of years served on Positions Held	No. Years No. Years all committees

Date Submitted: _____

Service rendered with Local, State and National Youth Bowling Associations:

Organization	Positions Held	No. Years	
			
			
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MAIL NO LATER THAN JANUARY 30, 2024 TO: Hall of Fame Committee	Submitted by:		_
PO Box 217	-		
Grandville MI 49468-0217	Signature		
Date Received:	Address		_
	City	State Zip	_