

**ST LOUIS USBC ASSOCIATION  
Board of Director's  
Adult & Youth Director's Application**



Check Applicable Applicant Box or Boxes:

Director:  Youth Director:  President:  Vice-Pres.  Incumbent:

Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Email address \_\_\_\_\_

Name of certified leagues of which you are a regular member:

\_\_\_\_\_ Center \_\_\_\_\_

\_\_\_\_\_ Center \_\_\_\_\_

\_\_\_\_\_ Center \_\_\_\_\_

Do you have a current USBC card? \_\_\_\_\_ USBC Card Number: \_\_\_\_\_

Are you presently bowling in an uncertified league? \_\_\_\_\_

If yes, name and location: \_\_\_\_\_

**List any offices held:**

League or Assn.	Office Held	# of Years	Committees You Have Served
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If employed, give firm name, position held, job responsibilities or if a student, give school name, grade level and G.P.A., extra-curricular activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If not employed, list past employment, position held, job responsibilities:

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List any bowling organizations with which you hold or have held membership/affiliation:

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List offices and/or affiliations in organizations other than bowling:

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- DO YOU HAVE:**
1. A working knowledge of USBC rules and regulations? \_\_\_\_\_
  2. The time to visit leagues, as your service is required? \_\_\_\_\_
  3. The time to attend various committee meetings to which you will be appointed? \_\_\_\_\_
  4. The time to help work and/or participate in our tournaments? \_\_\_\_\_

**IF ELECTED,** I will be required to attend at least three Board Meetings each year and at least one of the two Membership Meetings each year, and attend committee meetings and various other responsibilities. I will also be required to help work at least three of our tournaments each year. I understand that I must secure Registered Volunteer Program from USBC and receive clearance from SafeSport. The term of office for directors is three years.

I hereby permit my name to be placed in nomination for Director of the St Louis USBC

Association and agree to serve if elected. \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Candidate