

# United States Bowling Congress League Application

Please Print.

League Application # **175938**

Send application and dues to local processor (local association or center) within 30 days of first league session. DO NOT send directly to USBC Headquarters.

## 1. Bowling Center

Name \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

## 2. League Name

## 3. Association Name

Adult Merged or BA \_\_\_\_\_

Youth or WBA \_\_\_\_\_

## 4. Type of League

### Adult

- Adult Mixed       STANDARD  
 Adult Women       BASIC  
 Adult Men  
 Adult/Youth Mixed

### Youth

- Standard       High School  
 Bumper       Bowl like a Boy/Girl

## 4a. Check any that apply

- This is a managed League (See Rule 100j)  
 Scholarship SMART # \_\_\_\_\_  
 Senior League  
 Travel League

## 5. Game Format

- Standard American Tenpin  
 Baker /Scotch Doubles  
 No Tap/3-6-9/Best Ball  
 Bumper

## 5a. Lane Conditions

- Check all that apply  
 House/Standard  
 Sport/Challenge

## 6. Teams

Number of Teams \_\_\_\_\_

Number of Players per Team \_\_\_\_\_

## 7. Date Schedule Begins

## Date Schedule Ends

## Day of Week Bowled

## Time Bowled

## # Weeks League Bowls

(Month / Day / Year)

(Month / Day / Year)

## 8. League Secretary/Manager/Youth Official

ID# \_\_\_\_\_

Male

Female

First Name \_\_\_\_\_

Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_

Jr./Sr./III \_\_\_\_\_

Mailing Address \_\_\_\_\_

Apt. # \_\_\_\_\_

Primary Phone \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Secondary Phone \_\_\_\_\_

E-mail \_\_\_\_\_

## 9. League President/Youth Supervisor

ID# \_\_\_\_\_

Male

Female

First Name \_\_\_\_\_

Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_

Jr./Sr./III \_\_\_\_\_

Mailing Address \_\_\_\_\_

Apt. # \_\_\_\_\_

Primary Phone \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Secondary Phone \_\_\_\_\_

E-mail \_\_\_\_\_

## 10. Mark here if League Secretary is also the Treasurer.

ID# \_\_\_\_\_

E-mail \_\_\_\_\_

League Treasurer First Name, Initial, Last Name, Jr./Sr./III \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

League Treasurer Primary # \_\_\_\_\_

League Treasurer Secondary # \_\_\_\_\_

## To Be Completed by Youth and/or Adult Youth Leagues

## 12. Authorized Adult Youth Representative at Local Association Meetings

ID# \_\_\_\_\_

E-mail \_\_\_\_\_

Adult Youth Representative First Name, Initial, Last Name, Jr./Sr./III \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Adult Youth Representative Primary # \_\_\_\_\_

Adult Youth Representative Secondary # \_\_\_\_\_

## 11. Bonding Burglary and Holdup Insurance

Estimated total league funds  
NOT INCLUDING lineage fees

\$ \_\_\_\_\_  
(Prize money, salaries, expenses, etc., (if none enter zero))

I acknowledge it is my responsibility to protect the league funds and perform my duties as found in the USBC Playing Rules book, Rule 102c.

Signature of League President \_\_\_\_\_

Date \_\_\_\_\_

The USBC insurance and bonding program affords coverage for league officers. No coverage is provided for funds lost due to bowling center insolvency or liquidation.

**PLEASE REFER TO THE BONDING CHAPTER IN YOUR RULES BOOK.**

Local Association Use Only  
MA0009 4/15

Application Received \_\_\_\_\_

Date \_\_\_\_\_

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