

Category: \_\_\_\_\_

Bowling Achievements: \_\_\_\_\_

Meritorious Service: \_\_\_\_\_

**VIRGINIA PENINSULA USBC BOWLING HALL OF FAME NOMINATION FORM**

NAME: \_\_\_\_\_

ADDRESS(STREET): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

ASSOCIATION: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Number of years VPUSBC certified: \_\_\_\_\_

Bowled in VPUSBC Tournaments: **YES NO**

Number of Tournaments bowled: \_\_\_\_\_

Minimum of 15 years active participation as an adult in the VPUSBC: **YES NO**

40 years of age: **YES NO**

Contributed to the good and welfare of the sport whether it being with administrative, organizational work or in any meritorious manner: **YES NO**

Demonstrated outstanding ability and sportsmanship in the sport of bowling: **YES NO**

**QUALIFICATIONS:** On a separate sheet of paper, please describe in your own words why you feel this person is an outstanding candidate who deserves the honor of being inducted into the Virginia Peninsula USBC Hall Of Fame; showing achievements and activities in bowling and for bowling. 15 years active participation within our association. Must be at least 40 years of age.

**Nominated By:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zipcode:** \_\_\_\_\_

**Home Phone :** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Deadline: June 1<sup>st</sup>**

**Send forms to: Hall Of Fame Chair:**

**Charlene Osbourne**

**c/o VPUSBC**

**P.O. Box 7510**

**Hampton, VA 23666**