

**ARBOR VALLEY USBC HALL OF FAME
NOMINATION APPLICATION
Legends Division**

NOTE: To recognize outstanding bowlers in their time when lower scoring was the norm and fewer award scores were bowled.

NAME OF NOMINEE: _____
(First) (Middle Int.) (Last)

ADDRESS: _____
(City) (State) (Zip)

BIRTHDATE: _____ **BIRTHPLACE:** _____

NEAREST RELATIVE NAME: _____

RELATIONSHIP: _____

ADDRESS: _____
(City) (State) (Zip)

Total years as Member of Arbor Valley USBC (or merged assn) _____

Total years as Member of USBC _____

HIGHEST AVERAGE ATTAINED: _____ YEAR _____ CITY _____

HIGHEST SERIES BOWLED: _____ YEAR _____ CITY _____

HIGHEST GAME BOWLED: _____ YEAR _____ CITY _____

NUMBER OF AWARD GAMES (298,299,300): _____
(Indicate How Many of each)

NUMBER OF AWARD SERIES (700,800): _____
(Indicate How Many of each)

COMPLETE THE FOLLOWING FOR ANY HIGH TOURNAMENT FINISHES INCLUDE EVENT, POSITION, YEAR AND SCORES BOWLED IN EACH CATEGORY:

LOCAL ASSOC.: _____

STATE ASSOC.: _____

USBC NATIONALS: _____

CONTINUE ON REVERSE

OTHER TOURNAMENTS: _____

OTHER SPECIAL AWARDS/ACHIEVEMENTS/HONORS OR COMMENTS: _____

LIST ANY OUTSTANDING SERVICES PROVIDED AS PROPRIETOR, SPONSOR, SQUAD ORGANIZER, TOURNAMENT OFFICIAL, PROMOTER OF BOWLING ACTIVITIES, ETC. ON THE LOCAL, STATE OR NATIONAL LEVEL: _____

ALL APPLICATIONS MUST BE RECEIVED NO LATER THAN MARCH 1ST FOR CURRENT YEAR CONSIDERATION.

Mail to: Roger Crawford
3598 Bella Vista Dr.
Ann Arbor, MI 48108

Submitted by: _____

Address: _____

Home Phone # _____

Date Submitted _____