



## Upstate SC USBC Board Application

### Mail Application to:

Upstate SC USBC  
501 Garrison Road.  
Simpsonville, SC 29681

Email: [assoc\\_manager@upstatescusb.org](mailto:assoc_manager@upstatescusb.org)

Website: [www.upstatescusb.org](http://www.upstatescusb.org)

### PLEASE TYPE OR PRINT – USE INK ONLY

Name:	
Address:	
Apt. No.:	
City/State/Zip:	USBC CARD #
Telephone – Home:	Telephone – Work:
Cell Phone:	E-mail:

### BOARD POSITION INTERESTED IN:

What board position are you interested in: (check appropriate boxes):	President: <input type="checkbox"/>	1 <sup>st</sup> Vice President: <input type="checkbox"/>	2 <sup>nd</sup> Vice President: <input type="checkbox"/>
	Director: <input type="checkbox"/>	Associate Director: <input type="checkbox"/>	

### Please answer the following questions:

1. Have you held a league office? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, what office did you hold?		
Office Held	League	Name of Association / Bowling Center

### 2. Have you been on any committees? ☐ YES ☐ NO

If yes, please list them: (example: Bowling All-Stars, PTA School Family Dinner, Fundraising)


### 3. Are you an active bowler, bowling in at least one certified league? ☐ YES ☐ NO

4. Have you ever held an office in a bowling Association? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, what office(s) have you held:	
Office Held	Name of Bowling Association

5. Are you currently involved with Youth Bowling? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, to what extent:

6. Have you a working knowledge of Roberts Rules of Order Newly Revised? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have time to attend <u>ALL</u> meetings called by the President? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have time for any committee work? <input type="checkbox"/> YES <input type="checkbox"/> NO

7. List any other hobbies or talents you have that would benefit this board:

8. SafeSport and Registered Volunteer Program:
According to the Safe Sport Act of 2017, USBC requires all local board members complete the SafeSport training & enroll in the Registered Volunteer Program
Do you have a current RVP Certification? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, RVP Expiration date: _____
If not, are you willing to obtain RVP certification within 45 days of the start of term? <input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby consent to have my name submitted for election. <input type="checkbox"/> YES <input type="checkbox"/> NO		
Signature of Applicant:		Date of Application:
Print Name:		

**Mail Application to: Association Manager UPSTATE SC USBC  
501 Garrison Road, Simpsonville, SC 29681**