



December 2011

Dear Association Manager:

Enclosed are applications for special recognition awards honored by the California USBC. Forms may be duplicated for distribution. You can also download these forms at **www.calusbc.com**.

These awards are for all CUSBC certified bowlers. The deadline for these award applications is **January 15**. Several awards have to be considered by the CUSBC Awards Committee and the Hall of Fame Awards Committee for approval, however the 20-pins over average award and youth honor score award applications are handled separately and on demand.

We are asking that the 20-pins over average awards be handled by Local Association Managers. This way the association office can fulfill requests from the leagues as they come in. ***A good way to reach the leagues is to put a copy of the award application with the average request form.*** Each local association office should have a supply already on-hand of these pins. Please continue to inventory and track the pins issued. When 2/3 of the awards have depleted, just send us the completed request form to replenish your supply of pins. Please note that we have adjusted the average verification for this award to be based on book average instead of 2/3 of the season bowled.

These awards (excluding the 20-pins over average and youth honor scores) will be presented at our Annual Convention, which will be held in June (Sacramento).

We know you have members in your local association that will qualify for several of these awards. Please make every effort to get the word out to your membership so that bowlers from your Association can be honored by the California USBC. We have also included application forms for our Youth State Scholarship (renewable up to 4 years) and our Star of Tomorrow \$1,000 Scholarship Youth Award. Thank you for your support to our great California bowlers!



20 PINS OVER AVERAGE AWARD

This award is for all USBC Certified youth and adult bowlers in all Associations within California.

The parameters are as follows:

1. Bowler must be a California USBC member in good standing and have an established qualifying average in a certified California USBC league.
2. Bowler must have achieved at least a twenty (20) pin increase in average from the previous season and have bowled at least 21 games in the league in which he/she established the qualifying average.
 - a. *If no book average, the final league average will be compared to the current season average as of 21 games in the same league.*
3. The increase must be verified by the Association Manager.
4. Form must be sent to the Local Association USBC office no later than **May 15** each year to qualify. If the league ends later than this date, notify the Local Association office for an extension.)
5. Local Association will issue awards so they may be presented to qualifiers.
6. Eligible participants will receive a maximum of one pin per season (Aug 1 – July 31) with all games bowled in one league.

Please fill out all information completely and legibly:

Name of Bowler _____

Address _____ City _____ Zip _____

E-mail _____ USBC Membership # _____

Telephone (____) _____ Cell Home Business

Local Association _____ Manager _____

2010-11 Highest Book Average _____ 2011-12 Highest Book Average _____

League(s) in which above averages were established:

2010-11 _____ Center _____

2011-12 _____ Center _____

Signature of Association Manager Verifying Information _____

Submit form by May 15 to the Local Association Office



20-Pins Over Average Re-Order Form

Send order form to:

45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880

Or order online at www.calusbc.com

Date _____
Association _____
Contact Name _____
Address _____
City _____ Zip _____
Phone _____
Email _____
Qty Requested _____



20-Pins Over Average Re-Order Form

Send order form to:

45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880

Or re-order online at www.calusbc.com

Date _____
Association _____
Contact Name _____
Address _____
City _____ Zip _____
Phone _____
Email _____
Qty Requested _____





ASSOCIATION OF THE YEAR AWARD APPLICATION

Deadline: JANUARY 15 and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • www.CalUSBC.com

Association Name _____ Phone (_____) _____

Address _____ City _____ Zip _____

President _____ Assoc. Mgr _____

Total Membership 10-11 _____ 09-10 _____ 08-09 _____

Do you have a Youth Leaders Program? _____ If so, how long? _____

Do you have travel leagues? _____ Association Championships? _____

How many teams entered last year? Open _____ Women _____ Youth _____

Please list other events that are sponsored by your association and how many participate each year:

Does your association offer scholarships? _____ If so, explain how the program is set up:

Do centers in your association participate in and promote the Annual State Championship? _____, If so, how many? Open _____; Women _____; Youth _____;

Masters _____; Queens _____; Prince & Princess _____; BVL _____ State Scratch _____; Pepsi Championships? _____, If so, what percentage of bowls participate? _____%.

Are there other functions that your centers promote for the good of your bowlers? _____

Please explain: _____

What does your association do to solve problems on a local level? _____

What lines of communication do you have between centers and the Association? _____

Does your association conduct regular center visitations? _____ Put on workshops or seminars? _____

Are your centers represented at your local association meetings? _____



COACH OF THE YEAR NOMINATION FORM

Deadline: JANUARY 15 and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • www.CalUSBC.com

If your coach is someone very special and does many things that help your league to succeed, and you would like to nominate him/her, please fill out the information requested below and send by the deadline to the address above.

Name of Coach _____

Bowling Center _____ **Association** _____

How many years coaching? _____

Are they Bronze-Silver or Gold Certified? _____ **Certified date** _____

Do they bring teams to State Youth Championships? _____ **If yes, how many teams?** _____

Member of the Registered Volunteer Program (RVP)? _____

Must be endorsed by other certified Coaches, Proprietors and/or Managers. Please verify the information submitted is accurate.

References Title		Phone	E-mail
1.		()	
2.		()	
3.		()	

Tell us why you would like to have your coach nominated. Give us examples of the special things that he/she does to make your bowling experience so great. *This application may ONLY be submitted by a Certified USBC Youth bowler.*

Submitted by USBC Youth _____ Membership # _____

Date _____ Phone # () _____ E-Mail _____

Additional sheets nominating this coach may be attached.

Office Use Only: Date Received _____



DISTINGUISHED SERVICE AWARD NOMINATION FORM

NOMINATE YOUR VOLUNTEER * ASSOCIATION LEADER * YOUTH PROPRIETOR * SPONSOR

We want to recognize Californians who have made outstanding contributions in the field of bowling. The nominee need not be a member of USBC.

Deadline: **JANUARY 15** and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • www.CalUSBC.com

Eligibility and Criteria for Nomination:

- The nominee must have made a valuable and consistent contribution to the sport of bowling.
- The nominee's service must have been sufficient in duration to demonstrate frequent and sustained efforts to further the education and promotion of bowling.

To submit a nomination, fill out the enclosed form. Include all the details of the nominee's contributions and efforts to the sport of bowling. The nomination form is also available on the website at calwba.org.

Include both the nominee's and your name, address and phone number.

All nominations will be carefully considered. Successful nominee(s) will be honored at the CUSBC Convention. Time and date to be determined.

Note: CUSBC Hall of Fame Members or Current Board Member of the California USBC Association are not eligible for this award.

Nomination will be considered in the year submitted. In order for a candidate to be reconsidered the following criteria must be met:

- Additional achievements and services beyond the original submission must be received by the deadline date of **January 15**.
- Nomination forms will be kept in the "active" file for five (5) years. After such time they will be destroyed.

California USBC Distinguished Service Award Nomination Form

Nominee's Name _____

Address _____

City _____ Zip _____

E-mail Address _____ Phone () _____

On a separate sheet of paper, please detail the valuable and consistent contributions the nominee has made to the sport of bowling. The following list is for reference purpose only. Include promotion service, leadership, cooperative efforts and support for bowling activity whether it is listed here or not. Remember to include the frequency and duration of the nominee's service. **Include this sheet with your nomination.**

- California USBC programs and tournaments
- Local Association programs and tournaments
- BVL Local and State
- Bowling Clinics (*in the past*)
- Bowling Instructors Workshops/Clinics (*in the past*)
- Support of Local Association promotional efforts and activities
- Bowling Council
- Host of CWBA, CSYABA and/or CSBA Tournaments (*in the past*)
- Community Involvement
- Community Recognition
- Team USA - local and state (*in the past*)
- Publicity and promotion
- National activities or projects that promote bowling
- Community Service
- Leadership
- Honors
- Other (Support of certified leagues, community leadership, etc)

Submitted by:

Name _____ Date _____

Address _____

City _____ Zip _____

E-mail Address _____ Phone () _____

Deadline: JANUARY 15 and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • www.CalUSBC.com

Office Use Only: Date Received _____



HALL OF FAME SUPERIOR PERFORMANCE AWARD

The members of the California USBC Board of Directors and any California USBC Local Association may submit nominations for Superior Performance. All nominations shall be considered confidential and if deemed qualified, but not recommended for selection, shall be retained for consideration for up to 3 years. Updates are encouraged by nominator.

Nominations close on **January 15** and shall be submitted to:
CUSBC, ATTN: HALL OF FAME COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • www.CalUSBC.com

Requirements for nomination to the California USBC Hall of Fame for **Superior Performance** are as follows but not limited to:

1. Member of the California USBC* **15** years unless career has been interrupted or shortened due to illness or disability
2. Must have bowled in **12** or more California USBC* Championship Tournaments unless career was interrupted or shortened by illness or disability
3. A First place finish in the California USBC* Championship Tournament, the California State Masters or the California Queen’s Tournament

**Reference to California USBC includes CWBA and CSBA*

PLEASE PRINT ALL INFORMATION

Nominee’s Name _____
Last Name First Name

Maiden (if applicable) _____

Address _____

City _____ State _____ Zip _____

E-mail Address _____ Phone () _____

USBC Membership # _____ Local Association _____

Member for _____ years.

Submitted by:

Name _____ Date _____

Address _____

City _____ Zip _____

E-mail Address _____ Phone () _____

Office Use Only: Date Received _____

Only certified scratch scores are to be submitted. Please use the same format on additional pages.

HIGHEST CERTIFIED AVERAGE(S) ATTAINED

HIGHEST CERTIFIED GAME(S) BOWLED

HIGHEST CERTIFIED SERIES BOWLED

***USBC OR LOCAL ASSOCIATION TOURNAMENTS WON**

(Runner up in USBC Championship, Queens or Masters Tournament should be noted)

EVENT PLACE

YEAR

EVENT PLACE		YEAR

OTHER TOURNAMENTS

(PBA Regionals, PCB, PCCB, WCST, NCST, WWPB should be noted)

EVENT PLACE

YEAR

EVENT PLACE		YEAR

SPECIAL BOWLING AWARDS OR HONORS

SPECIAL AWARDS OR HONORS OTHER THAN BOWLING



PROPRIETOR/MANAGER OF THE YEAR AWARD NOMINATION FORM

If the Proprietor of your center is someone very special and does many great things that help your Adult & Youth Programs and Bowlers; and you would like to nominate him/her, please complete nomination form and include a recent photo.

Deadline: **JANUARY 15** and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Blvd, Suite 7, San Rafael, CA 94903

Eligibility for the award should include the following:

1. Outstanding service in the promotion of adult & youth bowling.
2. Services to the Bowlers of California
3. Leadership on the local and/or state level.

This award may only be won one time.

Proprietor and/or General Manager of the Year Nomination

Proprietor/General Manager Name _____ Years in Business _____

Bowling Center _____ E-mail _____

Address _____ City _____ Zip _____

Phone # (_____) _____ Fax # (_____) _____

Number of Lanes _____ Total Number of Leagues _____ Total Number of Youth Leagues _____

Local Association _____

President _____ Secretary _____

Do you host: bowling parties? _____ House Tournaments involving Adults _____ Youth (i.e.: jr/adult doubles) _____

If so, how often? _____

Please list events that are sponsored or hosted by your center to benefit your adult and youth bowling programs:

Does your center offer scholarships or participate in scholarship program? _____ If so, explain: _____

Does your center have adult and youth program displays/bulletin board showing upcoming events/photos from tournaments and other center events? _____

Do youths in your center participate in and promote Local Association events such as Local Association Championships? _____ What other events to they promote and participate in? _____

Do bowlers in your center participate in and promote State Association events such as State Championships? _____ State Scratch Tournament? _____ Pepsi Championships? _____ BVL? _____

Queens? _____ Masters? _____ Prince & Princess? _____ Others? _____

Does your youth program conduct fundraisers to help with tournament entry fees and transportation? _____

If so, what percentage of your youths participate? _____ Please share some past fundraisers: _____

Are there other functions that your center promotes for the good of your bowlers? _____ Please explain: _____

Is your center represented at local association meetings? _____

Does your center present special achievement awards outside the normal awards? _____

If so, please explain: _____

Additional comments may be attached on separate sheets.

Submitted by _____ Title _____

Date _____ Phone # (_____) _____ E-mail address _____

Office Use Only: Date Received _____



STAR OF TOMORROW \$1,000 SCHOLARSHIP APPLICATION

PURPOSE

To recognize star qualities in a high school or college student who competes in the sport of bowling. Star qualities include distinguished sanctioned bowling performances on state, local, national, international, Team USA or Collegiate levels; academic achievement; and leadership. Award winners receive a \$1,000 scholarship.

ELIGIBILITY

The male or female nominee shall be:

1. An active member of the **California United States Bowling Congress Association** (Youth or Collegiate) and an amateur as defined by USBC rules.
2. A High School graduating **SENIOR** who has **APPLIED TO** — OR — is currently attending an accredited University, Junior College or Vocational Institution.
3. Younger than 20 years as of August 1, **preceding** the January 15 application date.
4. A current season bowler with a minimum **average of 175** and an outstanding record of bowling achievements in the past and current seasons.
5. Recorded as having **minimum of 2.0 GPA** or equivalent.

NOMINATION PROCEDURE

NOMINEE must:

1. **Complete** this official nomination form.
2. Include at **least one** letter of reference.
3. Include **current official school transcripts**.
4. Attach an **essay** of at least 100 words stating interests, hobbies, and future goals.
5. **Detail** involvement with the local and/or state USBC or other areas of the bowling arena, as well as any service rendered to his/her community.
6. Attach any **additional documentation** of any awards, honors, or community service, (i.e. Scouting, School or Community activities).

SUBMISSION

1. Application must be made using this official form.
2. **Type or print clearly all information.** Use a blank sheet of paper to continue all answers and number them to correspond with the question number (i.e., B1, C4, etc.).
3. Send this completed form and all accompanying documents to:
CUSBC, 45 Mitchell Blvd, Suite 7, San Rafael, CA 94903
4. The USPS postmark date **MUST BE** on or before **JANUARY 15.**
5. Any inquiries? Please e-mail assnmgr@ocusbc.org or call **714-554-0111.**

Section A – Nominee Information

1. Last Name _____ First Name _____ Middle Initial _____ Birth Date _____
2. Address _____ City _____ Zip _____ SS# _____
3. Home Phone _____ Cell Phone _____ Email Address _____
4. Name of USBC Youth Local Association: _____ USBC Member # _____

Section B – Education

1. Currently attending: _____ High School ()
2. Address: _____
3. Currently attending **OR** have applied to: (check one) College/University () Junior College () Vocational School ()
4. Name and address: _____

Section C – Scholastics

1. Grade Level in School _____ *Grade Point Average (Overall) _____ (*May earn as much as 55% towards eligibility points)
2. Required copy of current Official Transcript enclosed ()
3. List Scholastic Honors: Scholarships Awarded; Extracurricular Activities to your credit. (Attach a separate sheet if needed)

Section D – Bowling

- | | <u>2011-2012</u> | <u>2010-2011</u> | <u>2009-2010</u> |
|--|----------------------|----------------------|----------------------|
| 1. Highest Certified average 21 Games or More: | (S) _____ (SB) _____ | (S) _____ (SB) _____ | (S) _____ (SB) _____ |
| 2. Highest Certified 3-Game Scratch Series: | (S) _____ (SB) _____ | (S) _____ (SB) _____ | (S) _____ (SB) _____ |
| 3. Highest Certified Scratch Game: | (S) _____ (SB) _____ | (S) _____ (SB) _____ | (S) _____ (SB) _____ |
| (S) Standard League: | Center/City _____ | Day/Time _____ | Cert. # _____ |
| (SB) *Sport Bowling League: | Center/City _____ | Day/Time _____ | Cert. # _____ |

*Averages will be converted according to USBC Chart in the USBC Rule Book.

4. Tournaments: (1st Place finishes ONLY) Local, State, National, International, Team USA, or Collegiate. (Use separate sheet if needed)

5. List other **bowling** involvements: Name of organization(s); years served; offices held; projects; special awards/honors earned.

Section E – Non-Bowling Involvements

1. List your involvement with **non-bowling** activities: Name of organization(s); years served; offices held, special awards/honors earned.

Section F-Interests and Goals

Submit your Essay on a separate sheet that includes your full name. Please tell us in at least 100 words about your other interests and your personal goals.

Section G – Nominator’s Information

Nominator’s Name (Please Print): _____ Title _____

Address _____ City _____ Zip _____

Home Phone: _____ Cell Phone: _____ FAX: _____ Email: _____

Section H – Official Signatures

NOMINATOR’S Signature: _____ Date: _____

NOMINEE’S Signature: _____ Date: _____



YOUTH STATE SCHOLARSHIP APPLICATION

Deadline: **January 15** and shall be submitted to:

CUSBC, ATTN: YOUTH SCHOLARSHIPS
4212 Vista Del Rio Way, #8, Oceanside, CA 92057 | Phone (760) 726-8076

Platinum	12-15 Years Old - One Male, One Female - \$250 Each
Diamond	16-19 Years Old - One Male, One Female - \$500 Each

TO: All California U. S. B. C. Youth Bowlers
FR: Scholarship Committee/Youth Committee
Enclosed: Scholarship Application

Thank you for taking the time to apply for this scholarship. Please be sure to complete all applicable spaces on the form. Return the form to the Scholarship Committee at the above address. The application must be postmarked no later than January 15 of this year.

Please be sure to check the application for other necessary information such as School Transcripts and Letters of Recommendation. Give yourself time to acquire these items. If you cannot get all materials needed by the postmarked deadline, send the application with a note that the other materials (please specify) will be sent under separate cover. Be sure that the application is completed in a neat and organized fashion.

Thank you for applying for this scholarship. There is at least \$1,500.00 per year available for these awards. **Each scholarship is also renewable once in an institution of higher learning.**

Thank you,
California USBC Association Youth Committee

APPLICANT NAME _____ GENDER _____ E-Mail Address _____

ADDRESS _____ CITY _____ ZIP _____

PHONE (____) _____ USBC MEMB # _____ DATE OF BIRTH ____/____/____ AGE _____

BOWLING CENTER _____ LOCAL ASSOCIATION _____

SUBMITTED BY _____ SIGNATURE _____

ADDRESS _____ CITY _____ ZIP _____

PHONE # (____) _____ CELL # (____) _____ E-Mail Address _____

COACH'S NAME _____ SIGNATURE _____

ADDRESS _____ CITY _____ ZIP _____

PHONE # (____) _____ CELL # (____) _____ EMail Address _____

SIGNATURE OF APPLICANT _____ DATE _____

CALIFORNIA USBC SCHOLARSHIPS

Name _____

Gender: Male Female

Division: Diamond Platinum

QUALIFICATIONS

1. All applicants must be a member of the California USBC Association (Member ID#)
2. Scholarships may be awarded each year, but not necessarily every year in the following divisions and will be awarded only once to a recipient in a division. At the discretion of the committee, more than one scholarship/division may be awarded.
 - A. Diamond - 16-19 Years Old - One Male, One Female - \$500 Each
 - B. Platinum - 12-15 Years Old - One Male, One Female - \$250 Each
3. All Applicants must submit the last three years of school transcripts. (Your application will not be considered unless and until your official transcripts have been received).
4. Tournament Participation:
 - A. State Championship Tournament Number of Years _____
 - B. Local Association Championship Tournament Number of Years _____
 - C. State Scratch Tournament Number of Years _____
 - D. State Queens/Masters Tournament Number of Years _____
 - E. State Prince/Princess Tournament Number of Years _____
 - F. State Dukes/Duchess Tournament Number of Years _____
 - G. Pepsi Championships (Center, District or State) Number of Years _____
 - H. National Open Championships/Junior Gold Number of Years _____
5. Other Certified Tournaments. List the tournaments on an attached list. Give number of years each.
6. State Participation
 - A. CUSBC Meeting Delegate Number of Years _____
 - B. CYC Director Number of Years _____
 - C. CUSBC Officer/Director Number of Years _____
7. Local Association Participation
 - A. Local Association Officer/Director Number of Years _____
 - B. Local Association Youth Leader/Youth Comm. Number of Years _____
 - C. Other _____ Number of Years _____
8. Center Participation
 - A. Center Officer/Director (League) Number of Years _____
 - B. Youth Leader, League Level Number of Years _____
 - C. Other _____ Number of Years _____
9. State Convention Attendee (Workshops, Meeting, etc) Number of Years _____
Or other outside workshops, classes etc.
10. Leagues
 - Certified Leagues Number of Years _____
 - Certified Sports Leagues Number of Years _____

11. **League Attendance - List the last four years of participation (ex. 50%, 75%, 100% etc.)**
 Year _____
 Percentage _____
12. **Last three years of certified averages (Winter Book Average)**
 Year _____
 Average _____
13. **Bowling Awards Received - List Highest Four in each Category**
 A. Honor Scores _____
 B. 700 Series _____
 C. 600 Series _____
 D. 500 Series _____ Platinum Only
 E. 200 Games _____ Platinum Only
14. **List other activities outside of bowling: Clubs, community service, school government, band, etc. Attach Sheet Please.**
15. **Enclose Letter(s) of Recommendation (minimum of two, maximum of four). This must be included in the package or the application will not be considered.**
16. **Enclose Applicant's Statement (Include goals and aspirations; career choices, travel etc).**
17. **Junior Gold Member?** Yes No **Number of Years** _____
18. **Are you a certified coach?** Yes No **How Long?** _____

Deadline: January 15 and shall be submitted to:
 CUSBC, ATTN: YOUTH SCHOLARSHIPS
 4212 Vista Del Rio Way #8
 Oceanside, CA 92057
 Phone (760) 726-8076

Office Use Only: Date Received: _____ Score _____ Schol. Awarded \$ _____



YOUTH ALL-STAR TEAM

Earn a **FREE ENTRY** into the **2011 National USBC Youth Championships in Las Vegas!**

The four bowlers selected to the 2011 Youth All-Star Team will earn a **FREE ENTRY** into the 2011 National USBC Youth Championships to be held in July 2011 in Las Vegas, Nevada.

Each member will receive a team shirt plus a travel stipend. To be eligible to make this awesome *team, you must finish in first place in at least one of the following tournaments:

- **Youth State Championships – All-Events Champion**
- **Youth State Championships – Queens & Masters Champion**
- **Pepsi State Finals – 12-up Division Champions**
- **State Scratch Champions**
- **Star of Tomorrow recipient**

The CUSBC committee will make the team selection and will contact the youth for grade point information. *GPA will also be a consideration for making the team. Visit us online at **www.CalUSBC.com** for other awards available.

*"The best bowlers come
from California!"*

California USBC Association, Inc.
YOUTH HONOR AWARDS FORM

Please **Circle** Applicable Award: 300 299 298 11-in-a-Row 700 (Girls) 750 800

This is to certify that _____
USBC Youth member # _____ bowled a score of _____
on _____ 2012 in the _____ league or
tournament; certification # _____. (*List all games bowled for series awards*).

Association Name/Address

_____, CA _____

Coach's Signature: _____

Coach's Email: _____

Bowler's Signature: _____

Signature of Local Assoc Manager (required) _____

Send award to: _____

Note: *Only one award per youth bowler per lifetime progressive. A copy of the recap and frame by frame printouts must be included. Only games 1-2-3 are valid for series awards.*

Send form and printouts to:

Tom Leigh, CUSBC Youth Awards, 7407 Dempsey Ave., Van Nuys, CA 91406

California USBC Association, Inc.
YOUTH HONOR AWARDS FORM

Please **Circle** Applicable Award: 300 299 298 11-in-a-Row 700 (Girls) 750 800

This is to certify that _____
USBC Youth member # _____ bowled a score of _____
on _____ 2012 in the _____ league or
tournament; certification # _____. (*List all games bowled for series awards*).

Association Name/Address

_____, CA _____

Coach's Signature: _____

Coach's Email: _____

Bowler's Signature: _____

Signature of Local Assoc Manager (required) _____

Send award to: _____

Note: *Only one award per youth bowler per lifetime progressive. A copy of the recap and frame by frame printouts must be included. Only games 1-2-3 are valid for series awards.*

Send form and printouts to:

Tom Leigh, CUSBC Youth Awards, 7407 Dempsey Ave., Van Nuys, CA 91406