

Hall of Fame Nomination Form



All nominations are due March 31, of the nomination year to be considered for induction in the Hall of Fame at the Annual Bowler's Banquet. Additional pages may be used if needed.

HALL OF FAME NOMINATION CATEGORY – PLEASE SELECT ONE

- Achievement (Nomination based on bowling achievements)
- Service (Nomination based on service to bowling such as a board member, league officer, coach, volunteer, etc)
- Achievement and Service (Combination of Achievement and Service listed above)

NOMINEE INFORMATION

Name of Nominee: _____
Last Name First Name Maiden/Middle Name

Current Address: _____

City, State, Zip Code: _____
City State Zip Code

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

USBC Membership # _____

Kaw Valley USBC Member _____ years (to include previous membership in *TBA & WBA)

*Topeka Bowling Association / Women's Bowling Association

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ACHIEVEMENTS

Highest season league average _____

Highest certified game _____

Highest certified series _____

Number of certified 300 games _____

Number of certified 800 series _____

Number of certified 700 series (women/seniors only) _____

Number of certified 275 games (women/seniors only) _____

Bowler of the year: Yes / No If yes, number of years _____

Participated in Top 10: Yes / No If yes, number of years _____

National, State, City tournament titles:

Other achievement/awards:

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SERVICE WITH KAW VALLEY USBC

Local Association

Association Name	Office Held	Years	Committee Chair
Describe the nominee's involvement with the local association board.			

State Association

Association Name	Office Held	Years	Committee Chair
Describe the nominee's involvement with the state board.			

League Officer

League Name	Office Held	Years	Bowling Association

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Coaching (youth, high school, etc)

Type of Coach	Years	Location

Describe the impact the nominee has made with coaching.

Served as a delegate to –

State USBC Yes/No If yes, number of years _____

National USBC Yes/No If yes, number of years _____

OTHER

Please list additional information about the nominee the Hall of Fame selection committee should consider when evaluating the nomination such as service with another bowling association, state bowling association, national bowling association, or something not listed on the nomination form.

Please provide as much documentation as possible to substantiate information provided on this nomination. The more detail provided will assist the Hall of Fame selection committee when considering the nomination.

NOMINEE VERIFIES INFORMATION ON THIS NOMINATION FORM IS COMPLETE AND AS ACCURATE AS POSSIBLE –

Name

Date

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INFORMATION ABOUT NOMINATOR:

Last Name

First Name

Current Address

City

State

Zip

Home Phone

Cell Phone

Work Phone

Email

PLEASE RETURN THE COMPLETED FORM TO:

Kaw Valley USBC Association
Attention: Hall of Fame Committee
906 SE Rice Road - Topeka, KS 66607