

Nomination for Michigan State USBC WBA Hall of Fame Star of Yesteryear

Date Submitted: _____

Nominee must have achieved statewide recognition for her bowling ability and must have won at least one Michigan State USBC/WIBC WBA, Championship Tournament Title as a member of the actual team, doubles, singles or all events. She must have bowled in at least 10 Michigan State USBC/WIBC WBA Tournaments, unless illness or injury has shortened her bowling career. Championships earned previously under the Michigan Queens, Michigan Senior Queens, and/or the AJBC, YABA or Michigan State USBC Youth may also be considered. Only games and averages bowled in Michigan State USBC/WIBC WBA certified leagues or tournaments will be considered. She must be at least 50 years of age.

Name of Nominee: (Miss / Mrs. / Ms) _____

First Maiden Last

Address: _____ City: _____ State _____ Zip: _____

Birthdate (month/date/year): ____/____/____ (must be 50 years of age or older) Phone: _____

Local and State Association Affiliations (present and past): _____

Nearest Relative: _____ Relationship: _____

Address: _____ City: _____ State _____ Zip: _____

WOMEN'S STATE CHAMPIONSHIPS

Year	Event (T, D, S, AE)	Score
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Number of Years Bowled: _____

MICHIGAN QUEENS:

Year

MICHIGAN SENIOR QUEENS:

Year

Number of:

Michigan Queens Tournaments participated in: _____

Michigan Senior Queens Tournaments participated in: _____

LOCAL WOMEN'S CHAMPIONSHIP TOURNAMENT:

Year

Event (T, D, S, AE)

Score

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

WIBC/USBC NATIONAL WOMEN'S CHAMPIONSHIP TOURNAMENT:

WIBC/USBC NATIONAL QUEENS/SENIOR QUEENS:

Year	Event (T, D, S, AE)	Score
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Year	Event (T, D, S, AE)	Score
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Youth (State or National) Recognition – Actual ONLY:

Special Award:

Year	Game	Year	Series	STATE		NATIONAL		State or National
				Year	Event (T, D, S, AE)	Year	Event (T, D, S, AE)	
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

Additional Information or HONORS:

List any special honors nominee may have earned for bowling, service, Local or State Halls of Fame, and records held which are not included above (Example: High Games, Series, Averages):

Attach a separate sheet for additional information

MAIL NO LATER THAN OCTOBER 18, 2017 TO:

Hall of Fame Committee
 c/o 9709 Mueller
 Taylor MI 48180

Date Received: _____

Submitted by: _____

Signature _____

Address _____

City _____ State _____ Zip _____