YOUTH MEMBERSHIP APPLICATION

USBC YOUTH	MEN	IBERSHIP APPLICATIO	N New Member			
Bowling Center				League/Tournament Name		
EMAIL ADDRESS	REQUI	RED FOR PROCESSING				
Email Address						
PARENT INFO	RMA	TION				
Parent First Name				Parent Last Name		
Gender: \square M	ALE	FEMALE Date of	f Birth (mm/dd/yy	ууу)		
Mailing Address Apt.		Apt.	City	State	Postal Code	
BOWLER INF	ORMA	ATION				
First Name Last Name			Last Name		Email	
Date of Birth (mm/dd/yyyy) Phone Number			Phone Number	Bowler ID# (found on last year's card)		
Gender: \square M	ALE	FEMALE				
		plication you consent to the		name, local associatio	on and scores on BOWL.com	n
YOUTH MEMBERSHIP CARD OPTIONS				Account #		
NATIONAL			Exp Date			
MEMBERSHIP		Standard Membership	ship \$4.00	Name as it appears on card		
				Email of card holder		
UPGRADES		Bowlopolis	\$3.50	Day time tel. # of card holder		
	_	Junior Gold U15/U20	\$30.00			
		Junior Gold U12	\$10.00			
				Signature		
STOTAL PAID IN OTHER LEAGUE				METHOD OF PAYMENT: ☐ VISA ☐ MASTERCARD ☐ CHECK		
				□ MONEY ORDER/CASHIER'S CHECK □ AMEX		
Name of League Bowling Cen		Bowling Center		DATE RECEIVED BY USBC:		

MAIL FORM TO:

USBC YOUTH MEMBERSHIP 621 Six Flags Drive Arlington, TX 76011

Phone: (800) 514-BOWL ext. 8426

Fax: (817) 385-8262

Email: contactus@ibcyouth.com