



**NOMINATION FORM
HALL OF FAME
MERITORIOUS SERVICE**

SUBMIT BY JANUARY 1

Nominee must be a present or former member of the Colorado State USBC, as an adult, for at least 15 years (not necessarily consecutively). Candidate must have contributed through dedicated service to the general welfare and progress of the game of bowling in the state of Colorado.

Nominee is required to have performed service at the State level, either as a State Board member or a volunteer at State functions.

DATE: _____

NAME OF NOMINEE: _____

LAST NAME	FIRST NAME	MIDDLE
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ADDRESS: _____

STREET	CITY	STATE	ZIP
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NOMINEE'S BIRTH DATE: _____ (MO/DAY/YR) PHONE (____) _____

(Include Area Code)

CURRENT LOCAL ASSOCIATION MEMBERSHIP: _____

NEAREST RELATIVE: _____

NAME	RELATIONSHIP
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ADDRESS: _____

STREET	CITY	STATE	ZIP
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PLEASE SUBMIT THIS COMPLETE FORM NO LATER THAN JANUARY 1. USE ADDITIONAL SHEETS IF MORE SPACE IS NEEDED. SEND TO:

**Norm Reichen
2535 Hill Ave.
Grand Junction, CO. 81501-5139**

SERVICE ACCOMPLISHMENTS (attach additional pages, if necessary)

STATE

Number of years a Colorado State member _____
Number of Colorado State annual tournaments competed in _____
Number of Colorado State Jamborees/Workshops attended _____

List service within the Colorado State USBC: (Number of years on each).

Board of Directors _____
Committees _____
Youth _____
Volunteer at State tournament _____

LOCAL

Number of local association annual tournaments competed in _____
Number of local annual meetings attended _____

List service within local association(s): (Number of years on each).

Board of Directors _____
League Offices Held _____
Committees _____
Youth _____

NATIONAL

Number of USBC/WIBC/ABC annual meetings attended as a delegate _____
Number of years a USBC/WIBC/ABC member _____
Number of national championship tournaments competed in _____

List service with USBC/WIBC/ABC and other organizations (YABA, NWBW, 500, 600 or 700 Clubs, Pioneer Club, Committees, etc.): (Number of years on each).

OTHER Bowling Related ACCOMPLISHMENTS

Nominee's career: High Game _____ High Three-Game Series _____ Highest Average _____

(Print Name) Submitted By: _____

Signature: _____

Address: _____
Street City State Zip

Phone Number: