



# APPLICATION FOR CLARK COUNTY USBC BOARD



*Return Application to:*

CLARK COUNTY USBC  
6300 NE Highway 99  
VANCOUVER, WA 98665

Email: [ccusbc@clarkcountyusbc.com](mailto:ccusbc@clarkcountyusbc.com)

**PLEASE TYPE OR PRINT – USE INK ONLY**

Name:	
Address:	Apt. No
City/State/Zip:	USBC CARD #
Telephone – Home:	Telephone – Work:
Cell Phone:	E-mail:

### BOARD POSITION INTERESTED IN:

What board position are you interested in: (check appropriate boxes):	President: <input type="checkbox"/>	Vice President: <input type="checkbox"/>	Sargeant-at-Arms: <input type="checkbox"/>
	Director: <input type="checkbox"/>		

**Please answer the following questions:**

1. Have you held a league office?  YES  NO If so, what office did you hold?

Office Held	League	Name of Association / Bowling Center

2. Have you been on any committees?  YES  NO

If yes, please list them: (example: Bowling All-Stars, PTA School Family Dinner, Fundraising)


3. Are you an active bowler, bowling in at least one certified league?  YES  NO

4. Have you ever held an office in a bowling Association?  YES  NO If yes, what office(s) have you held:

Office Held	Name of Bowling Association

5. Are you currently involved with Youth Bowling?  YES  NO If yes, to what extent:


6. Have you a working knowledge of Roberts Rules of Order Newly Revised?  YES  NO

Do you have time to attend ALL meetings called by the President?  YES  NO

Do you have time for any committee work?  YES  NO

7. List any other hobbies or talents you have that would benefit this board:


8. SafeSport and Registered Volunteer Program:

According to the Safe Sport Act of 2017, USBC requires all local board members complete the SafeSport training & enroll in the Registered Volunteer Program

Do you have a current RVP Certification?  YES  NO If yes, RVP Expiration date: \_\_\_\_\_

If not, are you willing to obtain RVP certification within 45 days of start of term?  YES  NO

9. Why would you like to be on the Clark County USBC Board of Directors? :


I hereby consent to have my name submitted for election?  YES  NO

Signature of Applicant:		Date of Application:
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Print Name:	
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