

APPLICATION TO BE DELEGATE TO USBC STATE CONVENTION FOR CLARK COUNTY



Must be submitted prior to the start of the Annual Meeting

Mail Application to: CCUSBC 2101 E Evergreen Bv #102 Vancouver, WA 98661 (360) 694-6348

PLEASE TYPE OR PRINT – USE INK ONLY		
Name:		
Address:		
Apt. No.:		
City/State/Zip:	USBC CARD #	
Telephone – Home:	Telephone – Work:	
E-mail:		
Please answer the following questions:		
Have you been a delegate or alternate to the Sta	te Annual Meeting? □ YES □ NO	
If yes, How many meetings have you atte	nded and when was the last meeting you attended?	
Are you an active bowler, bowling in at least or	e certified league? ☐ YES ☐ NO	
The Clark County USBC Bowling Association willing to attend even though you will be response.	n may not be able to provide some funding to help off-set travel expensible for some out of pocket expenses?	nses, are you
□ YES □ NO		
Are you willing to attend a majority of the work	shop sessions and report back to the board with what you have learned?	
YES NO If yes, to what extent:		
Signature of Applicant:	Date of Application:	
Print Name:		

Clark County USBC