

Central New York USBC Association Application Informational Cover Page

The following pages are the application to apply to become a member of the board of directors. **Please be sure you fill in all applicable spaces provided.** Any applications that are incomplete will be discarded.

There will be no nominations from the floor.

Please send your application to:

Central New York USBC Association Attn: Nominating Chair 7201 Jones Road Syracuse, NY 13209

You may also email: <u>cnyusbc@gmail.com</u>

All applications must be received by May 15th



Central New York USBC Association Board of Directors Application

Mail Application to:

Central New York USBC 7201 Jones Road Syracuse, NY 13209 Email: cnyusbc@gmail.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:	Vice President:		
	(see qualifications below)	(see qualifications below)		
You must be a board member for at least 3 years to run for President or Vice President	Director:	Director Representing Youth:		

Please answer the following questions:

1. Have you held a league	office? \Box YES \Box NO If so, where \Box If so, where \Box NO	nat 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 or	ne certified league? YES NO
4. Have you ever held an office in a bowling Asso	ociation? I YES I 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 Rul	les of Order Newly Revised? VES NO
Do you have time to attend <u>ALL</u> meetings calle	ed by the President?
Do you have time for any committee work?	
7. List any other hobbies or talents you have that	t would benefit this board:
8. SafeSport and Registered Volunteer Progra	am:
According to the Safe Sport Act of 2017, USBC re in the Registered Volunteer Program	equires all local board members complete the SafeSport training & enroll
Do you have a current RVP Certification?	S O NO If yes, RVP Expiration date:
If not, are you willing to obtain RVP certification wi	ithin 45 days of start of term? YES NO
I hereby consent to have my name submitted for election	on. YES NO
Signature of Applicant:	Date of Application:

Print Name: