



**Pennsylvania State USBC Women's Bowling Association, Inc.**

**Outstanding Senior Woman Bowler Nomination Form**

**ELIGIBILITY REQUIREMENTS:**      **65 YEARS OF AGE OR OLDER**  
**Participated in five (5) State Senior Tournaments**  
**Participated in ten (10) State Annual Championship Tournaments**

**PERSONAL INFORMATION:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ USBC# \_\_\_\_\_

LOCAL ASSOCIATION \_\_\_\_\_ STILL BOWLING: YES or NO

NUMBER OF YEARS BOWLED \_\_\_\_\_ NUMBER OF LEAGUES \_\_\_\_\_

DO YOU ATTEND STATE MEETINGS? \_\_\_\_\_ HOW MANY \_\_\_\_\_

CLUB MEMBERSHIPS: 500 CLUB \_\_\_\_\_ 600 CLUB \_\_\_\_\_ 700 CLUB \_\_\_\_\_

**PLEASE INDICATE THE NUMBER OF YEARS YOU BOWLED IN THE FOLLOWING:**

STATE WBA CHAMPIONSHIP \_\_\_\_\_ STATE WBA SENIORS \_\_\_\_\_ STATE WBA QUEENS \_\_\_\_\_

LOCAL TOURNAMENTS \_\_\_\_\_ NATIONAL TOURNAMENTS \_\_\_\_\_

HIGH GAME \_\_\_\_\_ HIGH SERIES \_\_\_\_\_ 600'S \_\_\_\_\_ 700'S \_\_\_\_\_

**POSITIONS HELD: STATE AND/OR LOCAL ASSOCIATION AND LEAGUE**  
**(Please include any committees you have served on and the association)**

\_\_\_\_\_

**LIST OTHER ACCOMPLISHMENTS: VOLUNTEER, CHURCH, COMMUNITY, HOBBIES:**

\_\_\_\_\_

**Please add any other information that has not been covered on a separate sheet of paper or the back of this sheet.**

SUBMITTED BY: \_\_\_\_\_ DATE \_\_\_\_\_

SIGNED BY: \_\_\_\_\_ DATE \_\_\_\_\_

**PLEASE MAIL COMPLETED FORM TO SUSAN KRESGE ON OR BEFORE AUGUST 1 OF  
THE YEAR PRIOR TO INDUCTION. FORMS WILL BE FORWARDED TO THE  
CURRENT CHAIR.**

**Susan Kresge, Assoc. Mgr.  
RD#2, Box 2419  
Saylorsburg, PA 18353**