



LOCAL ASSOCIATION — 800 SERIES

2024-2025 OHIO STATE USBC YOUTH AWARD RECOGNITION FORM

PLEASE COMPLETE ALL INFORMATION FOR EACH BOWLER. THIS FORM IS DUE BY **JUNE 1, 2025**. PLEASE CONTACT ASSOCIATION MANAGER IF UNABLE TO MEET THIS DEADLINE TO MAKE OTHER ARRANGEMENTS.

Date Bowled: _____
Name: _____
Address: _____
City/State/Zip: _____
Parents/Guardians Phone: _____
Bowling Center: _____
Bowling Association: _____
Series: _____
Bowler ID: _____
Shirt Size: _____

Date Bowled: _____
Name: _____
Address: _____
City/State/Zip: _____
Parents/Guardians Phone: _____
Bowling Center: _____
Bowling Association: _____
Series: _____
Bowler ID: _____
Shirt Size: _____

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Bowling Association: _____
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