



Nomination For The Ohio Bowling Hall Of Fame
**AWARD FOR
PIONEER**

This award is for anyone who has contributed outstanding service and/or have sanctioned/certified bowling accomplishments worthy of Superior Performance in the State of Ohio prior to 30 years ago.
(Certification requirements do no apply to posthumous candidates.)

Please TYPE OR PRINT all information.

Date: _____ Date of Birth: _____ Nominee is: Living: _____ Deceased: _____

Name of Nominee: _____

Current Address: _____

City, State, Zip Code: _____ E-Mail: _____

USBC Bowlers I.D. No.: _____ Nearest Relative: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____ Phone: _____

MAIL NO LATER THAN FEBRUARY 1, TO:

Ohio State USBC
C/O Association Manager
P.O. Box 790 | Uniontown, Ohio 44685

TWO SIGNATURES REQUIRED:

Signature _____ Please Print Name _____

Address: _____ City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Signature _____ Please Print Name _____

Address: _____ City: _____ State: _____ Zip: _____ Phone: _____

Email: _____



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If Pioneer Candidate is to be recognized for Superior Performance, complete Pages 2 with signature on page 3

How many tournaments have you bowled in? Local: _____ State: _____ USBC: _____

How many years was nominee a member of Local Assn. _____ Ohio State Assn. _____ National _____

List performances in (ABC/WIBC) USBC local tournaments. Top Five (5) finishes only.

List performances in (BA/WBA) state tournaments. Top Five (5) finishes only.

List performances in other certified tournaments. (National, Regional, State, International, Collegiate)
Please indicate whether tournament was a professional or Amateur event. Top Five (5) finishes only.

BOWLING ACCOMPLISHMENTS

Please fill in the following information on the nominee. It is important to be as complete as you possibly can.

Highest Average _____ Year _____ Number of years 200 Average _____

Highest Game _____ Year _____ Number of 300 Games _____

Highest Series _____ Year _____ Number of 800 Series _____

Number of 700 Series _____ If Professional, list career earnings: _____

OTHER SPECIAL AWARDS OR HONORS IN THE BOWLING FIELD - BIOGRAPHICAL INFORMATION:



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STATE

If Pioneer Candidate is to be recognized for , Meritorious Service, complete page 3

Information of outstanding service rendered, office held, work with Youth Bowling Association, Bowling Council, Media, Bowling Centers Association of Ohio, etc. Offices held, Committees Served - include number of years each:

NATIONAL

Offices held, Committees Served –include number of years each:

LOCAL SPECIAL HONORS

List any special honors (Examples: Local/State Hall of Fame, Bowler of Year, Industry Awards, etc.)

Nomination form must be approved as accurate before it is submitted. Please sign below to verify the information is complete and accurate to the best of your knowledge.

Submitter _____ Date _____