



# Outstanding Association Leader Award

## Nomination Form

**Mail to:**

Linda LeMay  
41 N. Lakehurst Drive  
Eastlake, Ohio 44095

This award is to recognize the person who has contributed to their Local Association while serving as a board member and will be presented at the Annual Meeting of the Ohio State USBC.

**Nomination of Ohio State USBC Member**

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**Deadline:**

March 1st

**Name:** \_\_\_\_\_

**Local Association:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Member of Local Bowling Association** \_\_\_\_\_ **(number) of years.**

**Basic Qualifications:**

1. **Must be a current or past local association board member.**
2. **Nominee must have made a valuable and consistent contribution (a minimum of 5 years) to the sport of bowling.**
3. **Actively shares responsibility, authority, information and credit when working towards the achievement of a goal.**
4. **Communicates in a manner which is fair, straightforward, honorable, and open.**
5. **Sets a high standard of integrity by leading through example and maintains high personal standards.**

**Local and State Service Accomplishments:**

1. **Attendance at the Ohio State USBC Annual Meeting:** \_\_\_\_\_ **(number of years)**

2. **Number of years as a member of their local association board:** \_\_\_\_\_

A. **Positions Held:** \_\_\_\_\_

3. **Promotion of Membership Growth (explain):** \_\_\_\_\_

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4. **Promotion of Youth Bowling (explain):** \_\_\_\_\_

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5. **Promotion/Participation in other bowling activities (explain):** \_\_\_\_\_

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**Other Bowling Accomplishments:**

1. WIBC/ABC/USBC Member: \_\_\_\_\_ (number of years)
2. League Board Member: \_\_\_\_\_ (number of years)
  - A. Positions Held: \_\_\_\_\_
3. Delegate to Ohio WBA/Ohio State BA/Ohio State USBC Convention: \_\_\_\_\_ (number of years)
4. Bowling Awards or Honors, Hall of Fame, etc. (explain): \_\_\_\_\_

**Submitted by:**

**Name:** \_\_\_\_\_

**Local Association:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

*Attach a separate piece of paper as needed to answer above questions, and to tell us in your own words how this person has positively influenced the growth of your Local Association. Growth means not necessarily an increase in numbers, but in service to the membership. Nomination forms of nominees not selected for the Outstanding Association Leader Award will be kept on file for 5 years and reviewed annually.*

**Date Received:** \_\_\_\_\_