



COPPER COUNTIES

BOARD OF DIRECTORS CANDIDATE FORM

NAME BIRTH DATE

ADDRESS CITY/STATE ZIP
Email Address

TELEPHONE (Home) (Work) Ext (Cell)

NATIONAL ID NO. YEARS A USBC\* MEMBER YEARS AS LOCAL MEMBER

Name of sanctioned league of which you are a regular member this season:

Games to Date:

Are you presently bowling in any unsanctioned leagues?

Have you held a league office? Office(s)

Total number of years:

Name of Bowling Center where you now bowl:

LIST ASSOCIATIONS YOU HAVE HELD OFFICE IN:

Table with 3 columns: Name of Association, Position, Years

DO YOU:

- 1. Have a working knowledge of USBC rules and regulations?
2. Have a working knowledge of Roberts Rules of Parliamentary Procedures?
3. Have time to attend the Board of Directors Meetings and the Annual Meeting?
4. Have time to attend various committee meetings to which you may be appointed?
5. Have time to help with tournaments when required?
6. Participate in LOCAL and STATE sponsored Tournaments? Total (last 5 yrs)

I HEREBY CONSENT TO HAVE MY NAME PLACED IN NOMINATION FOR ELECTION/RE-ELECTION TO THE OFFICE OF... I HEREBY CONSENT TO HAVE MY NAME SUBMITTED FOR ANOTHER OFFICE SHOULD THIS BE THE DECISION OF THE NOMINATING COMMITTEE.

( ) Yes ( ) No

Resume attached (optional) Yes No

Resume should detail your bowling experience and any league offices or Board of Director Offices held and where. Do not include bowling scores. Hand in person to: Shan Nosbusch, Association President or Missy Bosley, Associate Manager or email:

ccusbassociationmanager@gmail.com

DEADLINE TO RECEIVE APPLICATION IS MAY 1, 2024

You must pass a background investigation to fill a position on the Board of Directors for CCUSBC ASSN.

SIGNATURE DATE