2011 WS USBC WBA 2012

ONLY 300 Games AND/OR 700 & 800 Series should be reported on this form.

Bowler's Name: _____ **ID #** _____

_____ _____ _____ _____

Bowler's Address **City** **State** **Zip Code**

E-mail Address: _____

Games: _____ _____ _____ _____ **300** **700** **800** **Yes** **No**

1st **2nd** **3rd** **Series** **Circle Award (s)** **First?**

Date Bowled: _____ **Association:** _____

Association Manager: _____

Bowlers in merged associations who have not paid $1.00 state womens dues are NOT eligible for these awards.

Please inform us if bowlers' name has changed. Completed form should be sent to:

WS USBC WBA, 1794 Allouez Ave, Suite D, Green Bay, WI 54311

Office use only

___All time list ___Season List ___Inventory ___Award ordered ___Annual Meeting Invite

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