

**NOMINATION FORM – WS USBC WBA HALL OF FAME -- SUPERIOR PERFORMANCE**

DATE \_\_\_\_\_

Name of Nominee: Miss \_\_\_\_\_  
Mrs \_\_\_\_\_  
Ms \_\_\_\_\_  
Last Name First Maiden/Middle  
Current Address \_\_\_\_\_  
Street City State Zip

Telephone Number (include area code) \_\_\_\_\_  
Local and State Association Membership (current and previous) \_\_\_\_\_

Number of years a WWBA/WS USBC WBA member \_\_\_\_\_

Number of WWBA/WS USBC WBA Championship Tournaments competed in \_\_\_\_\_

**CERTIFIED BOWLING ACCOMPLISHMENTS**

Nominee's:

Career high game \_\_\_\_\_  
Career high three-game series \_\_\_\_\_  
Career high season average \_\_\_\_\_  
An average of 185 or better for a minimum of 5 years \_\_\_\_\_

List all WWBA/WS USBC WBA Championship Tournament won, giving events, year and score:  
(indicate if a record - the year and score)

Team \_\_\_\_\_  
Doubles \_\_\_\_\_  
Singles \_\_\_\_\_  
All Events \_\_\_\_\_  
Badger Queen's Tournaments \_\_\_\_\_  
Where did you place? \_\_\_\_\_

List any top 6 finishes you may have had

Other WWBA/WS USBC WBA Accomplishments (600 Club, Senior Tournament) \_\_\_\_\_

Honors \_\_\_\_\_

List all WIBC/USBC Championship Tournaments won, giving events, year and score: (indicate if a record - the year and score)

Team \_\_\_\_\_  
Doubles \_\_\_\_\_  
Singles \_\_\_\_\_  
All Events \_\_\_\_\_

Other WIBC/USBC accomplishments: (International competition, Queens, 700, 600, Etc.) \_\_\_\_\_

Honors \_\_\_\_\_

**Superior Performance Cont.**

List all Local Championship Tournaments won, giving event, year and score: (indicate if a record - the year, score, and whether scratch or handicap)

Team \_\_\_\_\_  
Doubles \_\_\_\_\_  
Singles \_\_\_\_\_  
All Events \_\_\_\_\_  
Local accomplishments (700, 600, Senior Tournament, etc.) \_\_\_\_\_

Honors \_\_\_\_\_  
Other sanctioned scratch tournament / accomplishments: \_\_\_\_\_

Nominee's special honors and bowling contributions not included in any of the above categories: \_\_\_\_\_

Nearest relative \_\_\_\_\_  
Name Relationship  
Address \_\_\_\_\_  
Street City State Zip

MAIL NO LATER THAN AUGUST 1 to:

WS USBC WBA  
1548 Western Avenue  
Green Bay, WI 54303

Submitted by: \_\_\_\_\_  
Signature \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip  
Telephone number \_\_\_\_\_

Note: It will be the responsibility of the nominator to provide WS USBC WBA with any additional information on yearly basis.