



## RAPID CITY USBC ASSOCIATION YOUTH COMMITTEE APPLICATION

Name: (Last, First, Middle) \_\_\_\_\_

Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Number of years as a USBC (ABC/WIBC/YABA) member \_\_\_\_\_ ID Number \_\_\_\_\_

Are you a league bowler? Yes  No  Are you a coach/registered volunteer? Yes  No

Do you have children that bowl? Yes  No

League Offices Held: \_\_\_\_\_

Association Positions Held: \_\_\_\_\_

Association Activities Participation: \_\_\_\_\_

Special Skills: \_\_\_\_\_

Tell us something about yourself, and why you want to serve on the Youth Committee as well as what you bring to the RCUSBC Youth Committee: \_\_\_\_\_

\_\_\_\_\_

References: (Name, Address & Phone): \_\_\_\_\_

\_\_\_\_\_

### READ CAREFULLY BEFORE SIGNING THIS FORM

All information contained in this form is true to the best of my knowledge and belief. I understand that misrepresentation or omissions of any kind may result in denial of my application or be cause for subsequent dismissal if I am selected for the youth committee.

I authorize this association to investigate my responses and contact any or all references for the purpose of verifying any information I have provided.

**Signed by Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Leave completed form at any local bowling center, Attn: Rapid City USBC – President**