



Volunteer of the Year Nomination Form

Application due no later than June 1st of Current Season

This prestigious award recognizes an adult volunteer who has displayed outstanding efforts to foster, operate and promote certified bowling programs at the local or state level.

Please complete this nomination form completely and return to the address at the bottom of this form.

Section A- Nominee Information

Name _____ USBC # _____ Phone _____

E-Mail _____

List Organization(s) for which the Nominee Volunteers

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Please explain the nominee's involvement with each organization and why you feel they are worthy of consideration for this award. (Please attach another document if need more room) Feel free to include any letters of recommendation/support for the nominee.

Section B - Your Information

Name _____ Phone _____

Address _____

Email _____ Your connection to nominee: _____

Your signature _____ Date _____

Send Nominations to Recognition Committee
Oregon State USBC
PO Box 309
Oregon City, OR 97709

Email: recognition@osusbc.com