

**FLORIDA SPACE COAST USBC BA, INC.
HALL OF FAME NOMINATION**

Name of Nominee: _____

Address: _____

Years member of Florida Space Coast USBC BA, Inc. _____

Years bowled in Annual Association Tournaments: _____

Years bowled in Southeast Bowling Association Tournaments: _____

Years bowled in Florida State Tournaments: _____

Years bowled in ABC National Tournaments: _____

Years bowled in USBC National Tournaments: _____

Years bowled a 195 average or better in Association: _____

Outstanding Bowling Achievements: _____

Please indicate Category in which nominee is to be considered:

1. Bowling Ability: _____

2. Bowling Service: _____

Number of years bowler has bowled: _____

Number of years bowler has served in such categories as:

League Officer: _____ State Officer: _____ Regional Officer: _____

National Officer: _____ Coach/YABA: _____ Seniors: _____

Handicapped: _____ Member of other bowling events: _____

Number of years served Florida Space Coast USBC BA, Inc. at bowling functions such as: Meetings, Conventions, Local, State, Regional, National, Jamborees and other such functions: _____

Other accomplishments or comments: _____

Submitted by: _____

Date: _____

IN ORDER TO BE CONSIDERED, HALL OF FAME NOMINATIONS MUST BE SUBMITTED, WITH PROPER DOCUMENTATION, BY JANUARY 1st

Submit to: Fran Hopewell
Association Manager
FSCBA Hall Of Fame
311 School Road
Indian Harbour Beach, FL 32937