

# MASSACHUSETTS USBC

## HALL OF FAME

### SUPERIOR PERFORMANCE NOMINATION FORM

---

Nominee must have bowled in 10 Massachusetts Championship Tournaments unless injury or illness has shortened their career. He/She must have won STATE recognition for their bowling ability and must have an outstanding record in Massachusetts Championship Tournaments.

---

PLEASE TYPE or PRINT

Date \_\_\_\_\_

Name of Nominee ( ) Miss ( ) Mrs. ( ) Mr.

Phone( ) \_\_\_\_\_

---

Last Name

First Name

Maiden/Middle Name

---

Street

City & State

Zip Code

---

E-mail Address \_\_\_\_\_

---

Local and State Association Membership (# of years current and # of years previous)

---

### **BOWLING ACCOMPLISHMENTS**

#### STATE

List all Massachusetts Championship Tournaments (500, 600 Club, Senior and Championship) won, including event, year and score

---

---

List other state and/or regional titles (WASA, NEBA, ABT, etc.)

---

---

List other state honors (Bowler of Year, Season High Average, etc.)\_\_\_\_\_

---

List other state records held, scoring accomplishments, honors won, etc.

---

LOCAL

List all local championship tournaments won, including event, year and score

---

List other local titles (POA tournament, etc.)

---

List other local honors (high average, high series, league championship, etc.)

---

Information submitted will be kept in an active file for 5 years. Nominees will be automatically be reconsidered annually. It will not be necessary to submit a new form. However, additional information will be appreciated.

