GREATER DES MOINES USBC OPERATIONS MANUAL

NOMINATION FORM FOR GREATER DES MOINES USBC BOARD OF DIRECTORS

NAME	EMAIL			
ADDRESS	CITY	STATE	ZIP	
HOME PHONE	CELL PHO	ONE		
USBC Membership #	(required)			
Office to be nominated for (please check o	one): All people on the boar	d must be CERTIFIED BOWL	ERS!	
President, Even Years (r	must have served as a Vice-	President or be current President	dent)	
1st Vice-President, Even	1st Vice-President, Even Years (Must have served as a director for four years)			
2 nd Vice-President, Odd Years (Must have served as a director for four years)				
3rd Vice-President, Even	Years (Must have served as	s a director for four years)		
4th Vice President, Odd \	Years (Must have served as	a director for four years)		
Director (9 Even Years,	9 Odd Years)			
Local bowling involvement. Why do you w	ant to be on the hoard?			
Educat bowning involvement. Why do you w	ant to be on the board?			
Are you a current Board Member?	Yes	No	# of years.	
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Have you ever served on the Board?	res	NO	# of years	
Have you served on local USBC Committe	es? (Please list years & co	ommittees):		
Other information of out would				
Other information about yourself:				
Have you ever been convicted of a felony?	? Yes	No		
Deadline	Date:			
Send to: Association Manager				
gdmbowlingmanager@gmail.com	Signature:			
gamsowiiigmanager <u>w</u> gmaii.com	olynature.			