



ASSOCIATION OF THE YEAR AWARD APPLICATION

Deadline: JANUARY 15 and shall be submitted to:
CUSBC, ATTN: AWARDS COMMITTEE
45 Mitchell Boulevard, Suite 7, San Rafael, CA 94903-2011
Phone (415) 492-8880 • CalUSBC.com

Association Name _____ Phone (_____) _____

Address _____ City _____ Zip _____

President _____ Assoc. Mgr _____

Total Membership 2016-17 _____ 2015-16 _____ 2014-15 _____

Do you have a Youth Leaders Program? _____ If so, how long? _____

Do you have travel leagues? _____ Association Championships? _____

How many teams entered last year? Open _____ Women _____ Youth _____

Please list other events that are sponsored by your association and how many participate each year:

Does your association offer scholarships? _____ If so, explain how the program is set up:

Do centers in your association participate in and promote the Annual State Championship? _____, If so, how many? Open _____; Women _____; Youth _____; Masters _____; Queens _____; Prince & Princess _____; CA State Singles _____; BVL _____; State Scratch/DW Challenge _____; Pepsi Championships? _____, If so, what percentage of bowls participate? _____%.

Are there other functions that your centers promote for the good of your bowlers? _____

Please explain: _____

What does your association do to solve problems on a local level? _____

What lines of communication do you have between centers and the Association?

Does your association conduct regular center visitations? _____ Put on workshops or seminars? _____

