

PROPRIETOR/MANAGER OF THE YEAR AWARD NOMINATION FORM

If the Proprietor of your center is someone very special and does many great things that help your Adult &Youth Programs and Bowlers; and you would like to nominate him/her, please complete nomination form and include a recent photo.

Deadline: JANUARY 15 and shall be submitted to: CUSBC, ATTN: AWARDS COMMITTEE 3673 Industry Ave #102, Lakewood, CA 90712 (415) 492-8880 • CALUSBC.com

Eligibility for the award should include the following:

- 1. Outstanding service in the promotion of adult & youth bowling.
- 2. Services to the Bowlers of California
- 3. Leadership on the local and/or state level.

This award may only be won one time.

Proprietor and/or General Manager of the Year Nomination

Proprietor/General Manager Name		Years in Business
Bowling Center	E-mai	ail
Address	City_	Zip
Phone # ()	Fax #	# ()
Number of Lanes Total	Number of Leagues	Total Number of Youth Leagues
Local Association		
President	Secretary_	У
		g Adults Youth (i.e.: jr/adult doubles)
If so, how often?		
Please list events that are sponsored	or hosted by your center to ben	enefit your adult and youth bowling programs:
Does your center offer scholarships o	r participate in scholarship pro	ogram? If so, explain:
Does your center have adult and youtl and other center events?		pard showing upcoming events/photos from tournaments
Do youths in your center participate in	and promote Local Association	
Do bowlers in your center participate i	n and promote State Association	tion events such as Adult State Championships?
Sr Singles? CA State Si	ngles? DW Challe	llenge? Youth State Championships?
		ent entry fees and transportation?
If so, what percentage of your youths	participate? Please sh	share some past fundraisers:
Are there other functions that your ce	nter promotes for the good of y	your bowlers? Please explain:
Is your center represented at local ass	sociation meetings?	
Does your center present special achi	<u> </u>	normal awards?
If so, please explain:		
Additional comments may be attached Submitted by	-	Title
Date Phone #		E-mail address
		Office Use Only: Date Received