



# GUIDELINES FOR GREATER CEDAR VALLEY HALL OF FAME/ SPONSOR OF THEYEAR

Name of Nominee \_\_\_\_\_

## Hall of Fame

### SKILL

Tournaments:

Local top five (5) finishes:

Event _____	Year _____	Place _____
Event _____	Year _____	Place _____
Event _____	Year _____	Place _____

State top three (3) finishes:

Event _____	Year _____	Place _____
Event _____	Year _____	Place _____
Event _____	Year _____	Place _____

USBC Championship top ten (10) finishes:

Event _____	Year _____	Place _____
Event _____	Year _____	Place _____

Other Tournament CHAMPIONSHIPS:

Local/Iowa Match Games \_\_\_\_\_

Queens/Masters, Greater Iowa \_\_\_\_\_

### Individual Accomplishments

List High Games of 300, 299, 298 and year(s) bowled:

\_\_\_\_\_

List High Series and year(s) bowled:

\_\_\_\_\_

List High Average: \_\_\_\_\_

### MERITORIOUS SERVICE

Local Association/State Positions held/Awards \_\_\_\_\_

LEAGUE office held (President, Secretary, Treasurer, Secretary-Treasure only), list year(s) \_\_\_\_\_

Promotional, scorekeeping, workshops, tournament managers etc., list \_\_\_\_\_

\_\_\_\_\_

USBCYA state and local offices held (President, Secretary-Treasurer) list year(s) \_\_\_\_\_

\_\_\_\_\_

List year(s) ACTIVE Coach \_\_\_\_\_

List year(s) Certified Coach \_\_\_\_\_

List year(s) H.S. Federation Coach \_\_\_\_\_

List other accomplishments such as, GCVBA committees, contributions made to bowling (500, 600, 700 clubs, Bowling Council, 20 Year Club, Bowling Writers, etc.) \_\_\_\_\_

\_\_\_\_\_

**Please use this information as a guideline for the required write up.**

.....

## SPONSOR OF THE YEAR

Number of years sponsoring teams in leagues/tournament: \_\_\_\_\_

Other contributions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MUST BE SUBMITTED NO LATER THAN FEBRUARY 1.**

Return to: Loretta Wander, Association Manager  
2110 S Oak Ave.  
Cedar Falls, Iowa 50613-4637

OR Chairman of Hall of Fame committee.

DATE RECEIVED: \_\_\_\_\_



## SPONSOR OF THE YEAR

This award is presented to one (1) sponsor each year, if nominees are submitted. Please consider sponsors in your league. Anyone can nominate any deserving sponsor.

Number of years sponsoring teams in leagues/tournament:

---

---

---

Other contributions: \_\_\_\_\_

---

---

---

---

---

---

---

**MUST BE SUBMITTED NO LATER THAN FEBRUARY 1.**

Return to: Loretta Wander, Association Manager  
2110 S Oak Ave.  
Cedar Falls, Iowa 50613-4637

OR Chairman of Hall of Fame committee, Joe Engelkes

DATE RECEIVED: \_\_\_\_\_