



GUIDELINES FOR GREATER CEDAR VALLEY HALL OF FAME/ SPONSOR OF THE YEAR

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.

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SPONSOR OF THE YEAR

Number of years sponsoring teams in leagues/tournament: _____

Other contributions: _____

MUST BE SUBMITTED NO LATER THAN FEBRUARY 15th.

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.

Sponsor: _____ League(s) _____

Number of years sponsoring teams in leagues/tournament:

Leagues (list): _____

Tournaments (list): _____

Other contributions: (i.e. shirts) _____

Additional forms available at centers and gcvusbc.com

MUST BE SUBMITTED NO LATER THAN FEBRUARY 15th.

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 Rec'd: _____

Rev 3/14/17