

Ohio (state) tournament title(s) won:	Score	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Number of years participation in state tournament: _____

Local Association tournament title(s) won:	Score	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Performance in other tournaments:

National:

Other:

Other special awards or honors in the bowling field:

A picture would be helpful, if available, for the Hall of Fame Board to review.

Attach a separate sheet for additional information.

MAIL NOT LATER THAN OCTOBER 1 TO:

Ohio USBC WBA Association Manager
P.O. Box 752048
Centerville, OH 45475

TWO SIGNATURES REQUIRED

Submitted by: _____
Signature

Address

City State Zip

Area Code Phone No. E-Mail Address

Signature Address City State Zip