



*Board of Directors Application*

<i>APPLICANT INFORMATION - Please type or print clearly</i>			
<i>Position Applying For:</i>			
<i>President</i> ___ <i>Vice President</i> ___ <i>Sgt-at-Arms</i> ___ <i>Director</i> ___			
<i>Last Name</i>	<i>First Name</i>	<i>Middle Initial</i>	
<i>Street Address</i>	<i>Day Telephone</i>	<i>Email Address</i>	
<i>City, State, Zip</i>		<i>Evening Phone</i>	
<i>Are you under 18 years of age?</i>	<i>Yes</i> _____	<i>No</i> _____	
<i>Have you ever been convicted of a misdemeanor or felony as an adult (18 or older)</i>			
_____ <i>Yes</i> _____ <i>No</i>			
<i>If yes, please list circumstances and date. Exclude minor traffic and other convictions which have been judicially dismissed, expunged, sealed, or eradicated. All circumstances will be considered.</i>			
<i>ASSOCIATION HISTORY: List present or most recent association position first. Complete even if accompanied by a resume.</i>			
<i>Association</i>	<i>Position/title</i>	<i>Date from</i>	<i>Date to</i>
<i>I have served on a committee(s) in the following association(s):</i>			
<i>Association</i>	<i>Committee</i>	<i>Date</i>	
<i>Previous League Experience:</i>			

*Agreement to perform duties of position in The Central Coast USBC Association that I am being nominated for:*

a. *I agree to be able to work evenings, weekends and days periodically to promote bowling, special projects, tournaments and events for the Central Coast USBC Association*  
Yes \_\_\_ No \_\_\_

b. *I agree to attend Central Coast USBC Association board meetings, special meetings and committee meetings*  
Yes \_\_\_ No \_\_\_

c. *I agree to serve on at least two committees for the Central Coast USBC Association and will be chair of at least one committee when requested by the President.*  
Yes \_\_\_ No \_\_\_

d. *I agree to promote bowling in our community and put forth a positive attitude representing the Central Coast USBC Association.*  
Yes \_\_\_ No \_\_\_

e. *I agree to follow and abide by the bylaws of the Central Coast USBC Association, California USBC and National USBC.*  
Yes \_\_\_ No \_\_\_

f. *I hereby consent to have my name placed on the ballot for the position with the Central Coast USBC Association as indicated above.*  
Yes \_\_\_ No \_\_\_

***PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION***

*All information contained in this application is true to the best of my knowledge. I understand that misrepresentations or omissions of any kind may result in denial or removal from office (whichever is applicable).*

*Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_*

*Thank you for your interest in our association*

*Turn application in to Association Manager Linda Fitzgerald or Association President Lou Gillless.*

Central Coast USBC Association, INC  
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