



## Candidate Qualification Central Alabama USBC Association

Please indicate all positions you are interested in:

President \_\_\_ Vice President \_\_\_ Sgt-at-Arms \_\_\_ Adult Director \_\_\_ Adult/Youth Director \_\_\_  
Youth/Youth Director \_\_\_ Adult/Youth Committee Member \_\_\_ Youth/Youth Committee  
Member \_\_\_ State/National Delegate \_\_\_ Nominating Committee \_\_\_

Candidate Name: \_\_\_\_\_ Birth date \_\_\_\_\_ Contact # \_\_\_\_\_  
Address: Street \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email/Fax \_\_\_\_\_

Please note all positions you have previously held in leagues and associations regardless of location. (Include local, state and national level).

Leagues: Years served:

Present: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Past: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Associations (please indicate local/state/national):

Present: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Past: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Committees:

(Please indicate committees you have served on, how long you served and if you were a member or chairman.)

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Other Bowling Affiliations/Awards/Honors:

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Any additional training, experience, skills, etc. that you feel are significant to this application:

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Why do you want to serve on the CAUSBCA Board?

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Why do you want to serve as a CAUSBCA State or National Delegate, and do you understand that you must be willing and able to travel, and also serve as the voice/vote of the CAUSBCA's desires regardless of personal opinions?

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If elected/appointed to a CAUSBCA board position I, the undersigned, understand that I will be required, by USBC National rules, to be investigated through the "Registered Volunteer Program". Association President, Association Manager and Youth Directors 18 years and older, are required to be approved as Registered Volunteers. I also understand that I will be required to sign the CAUSBCA Commitment to Serve, and CAUSBCA Code of Ethics.

Candidate Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_