

ARKANSAS STATE USBC
HALL OF FAME AND STAR OF TOMORROW APPLICATION

MISSION STATEMENT

The purpose of the Arkansas State USBC Hall of Fame is to recognize and honor adult members of the Arkansas State USBC for their outstanding achievements, conduct as a bowler and their service to the bowling community throughout the State.

The purpose of the Arkansas State USBC Star of Tomorrow is to recognize and honor youth members of the Arkansas State USBC for their scholastic average, outstanding bowling achievements, conduct as a bowler and their service to the community.

Categories for the Hall of Fame are Meritorious and Performance for Adult Men and Women. Categories for the Star of Tomorrow will be Youth Boy and Girl.

HALL OF FAME ELIGIBILITY

1. To be eligible for consideration for induction into the Arkansas State USBC Hall of Fame, a candidate must be or have been an adult member of the Arkansas State USBC or one of its predecessors for a minimum of 15 years as an adult member.
2. Must be at least 35 years of age as of August 1st.
3. Must have demonstrated good sportsmanship and integrity both on and off the lanes and not had their USBC (ABC/WIBC) membership suspended.
4. Hall of Fame members from the previous Arkansas State BA and WBA will be grandfathered into the Arkansas State USBC Hall of Fame.

STAR OF TOMORROW ELIGIBILITY

1. To be eligible for consideration for induction into the Arkansas State USBC Star of Tomorrow, a candidate must have been a member of a certified youth program in the State of Arkansas for the past five (5) years.
2. Must be at least a junior or senior in high school. Transcripts will be required.
3. Must provide a verified current twenty-one (21) game average.

INSTRUCTIONS

To submit a candidate for consideration into the Arkansas State USBC Hall of Fame or Star of Tomorrow, fill out the application form for the specific category and return to the Arkansas State USBC Hall of Fame Chairperson by April 30, 2021. **Any application received after April 30, 2021 will result in the nominee being disqualified for consideration for the current year.** All applications will be reviewed by the Arkansas State USBC Hall of Fame Committee to determine completeness and eligibility. **Failure to meet eligibility requirements or properly complete the application form will result in immediate disqualification.**

Mail To: ASUSBC Hall of Fame Chairperson
Dena Bunch
608 Maria Street
Springdale, AR 72762
rdbunch1@att.net 479-927-0460

Adopted 1-18-2020
Revised 8-22-2020 Service & Star of Tomorrow
Revision 11-14-20 Performance

ARKANSAS STATE USBC HALL OF FAME & STAR OF TOMORROW

INFORMATION FORM

APPLICANT BACKGROUND INFORMATION

Full Name	
Street Address	
City, State and Zip Code	
Alias(es); (i.e. Maiden Name)	
Date of Birth (MM/DD/YY)	/ /
USBC Membership Number	
Gender: (Circle)	Male Female
Home Phone: (With Area Code)	
Cell Phone: (With Area Code)	
Email Address	
Local Association Applied Through	
Local Association(s) Currently Bowling	
Local Association(s) Previously Bowled	

Select Category for Application

Meritorious Service Complete Pages 1-4		Performance Complete Pages 1, 5-6	
Combined (Service & Performance) Complete Pages 1-6		Star of Tomorrow Complete Pages 1, 7-10	

Person Submitting Application

Full Name	
Street Address	
City, State and Zip Code	
Phone: (With Area Code)	

With my signature below, I acknowledge all information presented on these forms to be true, correct and complete.

Signature of Candidate _____ **Date** _____

Signature of Parent/Guardian for Star of Tomorrow _____ **Date** _____

Please mail application to the ASUSBC Hall of Fame Chairperson listed on cover sheet.

Arkansas State USBC Hall of Fame Application

Meritorious Service

Bowler Information Form Must Accompany This Form

<u>Office Held</u>			
Office	No. Of Years	Year(s) Served	State
State Association	Example: 3	11, 13-14	
President			
Manager/Executive Director			
Vice-President			
Sergeant-At-Arms			
Secretary (pre USBC merge)			
Treasurer (pre USBC merge)			
Director			
Local Association	No. Of Years	Year(s) Served	State
President			
Manager/Executive Director			
Vice-President			
Sergeant-At-Arms			
Secretary (pre USBC merge)			
Treasurer (pre USBC merge)			
Director			
Bowling League	No. Of Years	Year(s) Served	State
President			
Secretary/Treasurer Combined			
Secretary			
Treasurer			
Vice-President			
Sergeant-At-Arms			
Youth Official/Supervisor			
Certified Coach			
National (Indicate Office/Position)	No. Of Years	Year(s) Served	

Delegate	No. Of Years	Year(s) Served
State Annual Meeting		
National Annual Meeting		

<u>Committee Work</u>		
State Committee	No. Of Years	Year(s) Served
Finance and Budget		
Audit		
Legislative		
Tournament		
Youth		
Hall of Fame		
Operations		
Credentials		
Charity Organizations		
Other:		
Local Committee	No. Of Years	Year(s) Served
Finance and Budget		
Audit		
Legislative		
Tournament		
Youth		
Hall of Fame		
Operations		
Charity Organizations		
Other:		

Note: Please attach a detailed list of the positions listed above with Association Name, League Name, etc.

Arkansas State USBC Hall of Fame Application

Performance

Bowler Information Form Must Accompany This Form

Arkansas State Championship Tournaments (AR USBC, ASBA, ASWBA)

List Top 3 Major Accomplishments

Tournaments – Finish Top 25 or List Top 3	No. Of Wins	Date(s)/Year(s) Won
1.		
2.		
3.		
Number of Years Participated In State Championship Tournament(s) (List Tournament Name and Number Of Years Of Participation)		
Tournament	Years of Participation	
1.		
2.		
3.		

National Tournaments (USBC, ABC, WIBC)

List Top 2 Major Accomplishments

Tournaments – Finish Top 25 or List Top 2	No. Of Wins	Date(s)/Year(s) Won
1.		
2.		
Overall Average In National Championship Tournament(s) Top 2 Tournaments		
Tournament	Overall Average	
1.		
2.		

Overall Average In Tournaments – State Or National
Top 2

Tournaments – Top 2	Overall Average
1.	
2.	

Awards and Recognition

State Awards, Scoring Achievements Or Recognitions
Top 3

Award – Top 3	Year
1.	
2.	
3.	

Other Pertinent Information Vital To Applicant For Performance

Arkansas State USBC

Star of Tomorrow

Youth Nomination Form

Bowler Information Form Must Accompany This Form – Page 1

Name Of School	Address, City, State, Zip
Present Scholastic Grade Point Average Based on a 4.0 Scale: _____	

Participation In Extracurricular Activities

School Activity	
1.	
2.	
Church Activity	
1.	
2.	
Community Activity	
1.	No. Of Hours:
2.	No. Of Hours:
3.	No. Of Hours:

(Note: Please List Additional Activities On Separate Paper)

Bowling Participation And Achievements

Sanctioned Leagues

1.
2.
3.
4.
5.

Local Youth Championship Tournament

Local Youth Championship	No. Of Wins	Date(s)/Year(s) Won
Team		
Doubles		
Singles		
All Events		

State Youth Championship Tournament

State Youth Championship	No. Of Wins	Date(s)/Year(s) Won
Team		
Doubles		
Singles		
All Events		

State Pepsi YBC Tournament

List Division	No. Of Wins	Date(s)/Year(s) Won

Sectional Pepsi YBC Tournament

List Division	No. Of Wins	Date(s)/Year(s) Won

Arkansas Challenge Tournament

List Division	No. Of Wins	Date(s)/Year(s) Won

Hill-Botter (Formerly Don Hill Memorial) Scholarship Tournament

List Division	No. Of Wins	Date(s)/Year(s) Won

National Sponsored Tournaments

Junior Gold Championship Tournament

List Division	No. Of Wins	Date(s)/Year(s) Won

National Youth Championship Tournament

National Youth Championship	No. Of Wins	Date(s)/Year(s) Won
Team		
Doubles		
Singles		
All Events		

Other Tournaments – Local/State/Regional/National

List Tournament	No. of Wins	Date(s)/Year(s) Won
1.		
2		
3		
4.		
5.		

Youth Leaders Program

Local Participation: Yes _____ No _____	State Participation: Yes _____ No _____
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Offices Held

League:	No. Of Years	Year(s) Served
President		
Vice-President		
Secretary		
Local Association:		
Youth Director		
Director		
Officer		
State Association:		
Youth Director		
Director		
Officer		

Honors or Awards In Bowling and Other Organizations

Type of Honor or Award	Name of Bowling Organization and Other Organization	Date
1.		
2.		
3.		
4		
5.		

Highest Individual Game And Series

Highest Individual Game	Year Bowled
1.	
Highest Individual Series	Year Bowled
1.	

Years In Sanctioned Youth Bowling

Number of Years In Youth Program	
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Other Information

Highest Sanctioned League Average:_____ Year:_____ Number Of Games:_____
What would it mean to you to receive this award?

Three Letters of Recommendation Must Accompany This Application Form

(10)