

# Saginaw USBC Association Board of Director's and Delegate's Application

Please type or print clearly

Name \_\_\_\_\_ Day Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City, Zip Code \_\_\_\_\_ Evening Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Are you under the age of 18?                      Yes                      No

Have you ever been convicted of a crime or pleaded no contest for any offense other than any traffic violations?                      Yes                      No

Are you willing to be subjected to a background check by an independent agency?                      Yes                      No

Have you been suspended from ABC, WIBC or USBC?                      Yes                      No

Have you ever been a member of the Board of Directors of the Saginaw BA, Saginaw WBA or Saginaw USBC?                      Yes                      No

If "Yes", please list positions and years served.

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Are you currently or have you ever been a league officer?                      Yes                      No

If "YES", please list positions and years served.

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What position(s) are you applying for? (Circle all that apply)

1st Vice President  
Director

Michigan State Delegate  
USBC Delegate

