

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.

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

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

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

President
2nd Vice President
Director

Michigan State Delegate
USBC Delegate

