

# Greater Buffalo USBC Association

## Hall of Fame Nomination Form \* Bowling Performance

Name:		Home Phone:	
Address:		Cell Phone:	
		Date of Birth:	
		*Today's Date:	
Occupation:			
Family Members:			

\*This application will be held on file for 10 years. It should be updated when necessary.

### Qualifications

Number of Years Member of Greater Buffalo USBC (current), Buffalo B.A., Buffalo W.B.A., or Erie County Suburban W.B.A.:		Number of Years Bowled in George A. Obenauer Masters or WNY Queens Tournament: Highest Finish:	-----
Number of Years Bowled in All Star Winter League (BPAWNY, Black Velvet, etc): Lifetime Average:	-----	Number of Years Bowled in Classic Shootout / All Star Summer Leagues: Lifetime Average:	-----

### Greater Buffalo USBC Association and previous associations Buffalo Bowling Association; Buffalo Women's Bowling Association; Erie County Suburban Women's Bowling Association Tournament Achievements

Date Bowled	Tournament Name	Event	Event Score	Individual Score	Rank	Team or Teammates

### New York State Tournament Achievements

Date Bowled	Tournament Name	Event	Event Score	Individual Score	Rank	Team or Teammates

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**National/International Tournament Achievements**

Date Bowled	Tournament Name	Event	Event Score	Individual Score	Rank	Team or Teammates

**Other Notable Accomplishments**

Date or Season	League or Tournament Name	Accomplishment	Accomplishment Details

**Certified Honor Scores (298, 299, 300, 800)\***

Date Bowled	Award	Series	Games	League or Tournament	Center

\*Use separate sheet if necessary

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Individual Highs

	Score or Average	# of Games (Average)	Season (Average) Date (Series/Game)	League or Tournament	Center
Highest Certified Average					
Highest Certified Series					
Highest Certified Game					

*Nomination form must be approved as accurate by the nominee before it is submitted. Please have the nominee sign below to verify the information provided is complete and accurate.*

Nominee \_\_\_\_\_ Today's Date \_\_\_\_\_

Name of Nominator \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Weekday Telephone (\_\_\_\_) \_\_\_\_\_

**Please forward this application and/or resume to: Greater Buffalo USBC Association  
2448 Union Rd  
Cheektowaga, NY 14227-2230**