

USBC ADULT MEMBERSHIP APPLICATION

PLEASE PRINT

Bowling Center _____

League/Tournament Name _____

Bowlers ID# (found on last year's card) _____

Last Name _____

First _____

Initial _____

Mailing Address _____

Apt. _____

City _____

State _____

Zip Code _____

Evening Phone # _____

Date of Birth (mm/dd/yy) _____

Male

Female

Amount Paid THIS League \$ _____

Email Address _____

Membership choices

(see reverse for details of dues structure)

- | | | |
|--|---|--|
| <input type="checkbox"/> Standard | <input type="checkbox"/> Sport | <input type="checkbox"/> USBC Life Member |
| <input type="checkbox"/> Local Only* | <input type="checkbox"/> Upgrade to Sport | <input type="checkbox"/> Local Life Member |
| <input type="checkbox"/> State & Local Only* | <input type="checkbox"/> None* | <input type="checkbox"/> USBC Hall of Fame |

*Indicate OTHER League: _____

Name of League _____

Bowling Center _____

Signature _____

Date _____

Description of membership choices:

1. Standard – I am paying local, state and national dues with my membership.
2. Sport – I am paying local, state and national Sport dues with my membership.
3. Upgrade to Sport – I want to upgrade my current Standard membership to Sport.
4. Local only – I have a current membership in another association.
5. State & Local only – I have a current membership in another state.
6. USBC Life Member – I am a Life Member of USBC.
7. Local Life Member – I am a Life Member of my local association.
8. USBC Hall of Fame – I am a USBC Hall of Fame Member.
9. None – I already have a current membership.

I do not wish to receive non USBC mail.