

## MISSISSIPPI STATE USBC

## BOARD MEMBER APPLICATION

## PERSONAL INFORMATION

Name:			
Address:			
City:		State:	Zip:
Phone:		Email:	
Association:			
POSITION YO	OU ARE APPLYING FOR:	(PLEASE CIRCI	LE ALL THAT APPLY)
President	Vice President	Director	Youth Director
ASSOCIATIO	N/BOWLING EXPERIEN	CE	
List previous bo	oard and league offices held:		

List all other experience that you feel is related to this position:
Please read carefully before signing this form
All information contained in this application is true to the best of m knowledge and belief. I understand that misrepresentations or omission of any kind may result in denial or removal from office (whichever is applicable)
Signed: Date:
Thank you for your interest in our association.
Mail completed application to the Nominating Committee Chair:
Tony Engels 3521 Galloway Ave Jackson, MS 39216

<u>Deadline to submit application is June 1 of the current bowling season.</u>