



## Nomination For The Ohio Bowling Council Hall of Fame

# *Award For Superior Performance*

Bowling Centers Association of Ohio\* Ohio State USBC BA \*Ohio USBC WBA\* Ohio USBC Youth

This award is for those bowlers who are 40 years of age or older and have participated in sanctioned/certified bowling in Ohio for 10 years or more, with outstanding accomplishments in any USBC or Bowling Centers Association of Ohio certified leagues and/or tournaments. (Age and certification requirements do not apply to posthumous candidates.)

Please TYPE OR PRINT all information.

Category:  Superior Performance-Amateur  
 Superior Performance-Professional

Date \_\_\_\_\_ Date of Birth \_\_\_\_\_ Nominee is: Living \_\_\_\_\_ Deceased \_\_\_\_\_

Name of Nominee \_\_\_\_\_

Current Address \_\_\_\_\_

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

USBC Bowlers I.D. No. \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ A/C Phone \_\_\_\_\_

MAIL NO LATER THAN JANUARY 15, TO: Ruth Heath-Trott Phone (419)-485-3828  
P. O. Box 456 Questions: Email:  
Montpelier, Ohio 43543 grtrott@gmail.com

THREE SIGNATURES REQUIRED:

Signature \_\_\_\_\_ Please Print Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ A/C Phone \_\_\_\_\_

Signature \_\_\_\_\_ Please Print Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ A/C Phone \_\_\_\_\_

Signature \_\_\_\_\_ Please Print Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ A/c Phone \_\_\_\_\_



## Nomination For The Ohio Bowling Council Hall of Fame

# *Award For Superior Performance*

Bowling Centers Association of Ohio\* Ohio State USBC BA \*Ohio USBC WBA\* Ohio USBC Youth

How many tournaments have you bowled in? Local \_\_\_\_\_ State \_\_\_\_\_ USBC \_\_\_\_\_

How many years was nominee a member of Local Assn. \_\_\_\_\_ Ohio State Assn. \_\_\_\_\_ USBC \_\_\_\_\_

List performances in (ABC/WIBC) USBC local tournaments. Top Five (5) finishes only.

---

---

---

---

List performances in (BA/WBA) state tournaments. Top Five (5) finishes only.

---

---

---

List performances in other certified tournaments. (National, Regional , State, International, Collegiate) Please indicate whether tournament was a professional or Amateur event. Top Five (5) finishes only.

---

---

---

### BOWLING ACCOMPLISHMENTS

Please fill in the following information on the nominee. It is important to be as complete as you possibly can.

Highest Average \_\_\_\_\_ Year \_\_\_\_\_ Number of years 200 Average \_\_\_\_\_

Highest Game \_\_\_\_\_ Year \_\_\_\_\_ Number of 300 Games \_\_\_\_\_

Highest Series \_\_\_\_\_ Year \_\_\_\_\_ Number of 800 Series \_\_\_\_\_

Number of 700 Series \_\_\_\_\_

If Professional, list career earnings: \_\_\_\_\_



Nomination For The Ohio Bowling Council Hall of Fame

*Award For Superior Performance*

Bowling Centers Association of Ohio\* Ohio State USBC BA \*Ohio USBC WBA\* Ohio USBC Youth

OTHER SPECIAL AWARDS OR HONORS IN THE BOWLING FIELD:  
ie: Bowler of Year; Hall of Fame; Special Award Honors, Records Set

---

---

---

---

---

BIOGRAPHICAL INFORMATION

Use this page to list any information that was not presented in any other section of this nomination application:

---

---

---

---

---

*Nomination form must be approved as accurate before it is submitted. Please sign below to verify information provided is complete and accurate to the best of your knowledge.*

Submitter: \_\_\_\_\_ Date \_\_\_\_\_