New USBC Member **USBC ADULT MEMBERSHIP APPLICATION** New to Association **TEMPORARY MEMBERSHIP Bowling Center** League/Tournament Name Member ID# (found on last year's card) Last Name First Initial Suffix Member ID# Mailing Address Full Name Male Female City State Zip Code League Date of Birth (mm/dd/yyyy) Primary Phone Number Secondary Phone Number Membership Type I do not wish to receive non-USBC communication Email Address \$ **MEMBERSHIP CHOICES** Amount Paid □USBC Life Member □USBC Hall of Fame Standard ☐ State & Local Only Basic Local Only ☐ Local Life Member None Date purchased Please see reverse for a description of membership choices. Amount paying through this league: \$ IF NOT PAYING DUES WITH THIS APPLICATION, PLEASE INDICATE WHERE YOU PAID YOUR DUES: Paid on BOWLcom 🚨 Paid in other League 🚨 Signature - League Secretary Please retain receipt until official card is delivered in the mail. Name of League **Bowling Center** Signature Date Visit the "Find a Member" section on BOWL.com to print a copy By submitting this application, the applicant is agreeing to be bound by and comply with the USBC Bylaws, Rules, and Policy Manuals. Applicant also consents to the inclusion of his/her name, local association and scores on BOWL.com. NOT VALID UNLESS SIGNED BY LEAGUE SECRETARY **USBC ADULT MEMBERSHIP APPLICATION** New USBC Member □ New to Association **TEMPORARY MEMBERSHIP Bowling Center** RECEIPT League/Tournament Name Member ID# (found on last year's card) Last Name Suffix First Initial Member ID# Mailing Address Apt. Full Name Male Female City State Zip Code League **Primary Phone Number** Secondary Phone Number Date of Birth (mm/dd/yyyy) Membership Type I do not wish to receive non-USBC communication Email Address MEMBERSHIP CHOICES Amount Paid □USBC Life Member □USBC Hall of Fame ☐ Standard ☐ State & Local Only ☐Local Only □ Local Life Member □ None Date purchased Please see reverse for a description of membership choices. Amount paying through this league: \$ IF NOT PAYING DUES WITH THIS APPLICATION, PLEASE INDICATE WHERE YOU PAID YOUR DUES: Paid on BOWLcom 🚨 Paid in other League 🚨 Signature - League Secretary Please retain receipt until official card is delivered in the mail. **Bowling Center** Signature Visit the "Find a Member" section on BOWL.com to print a copy By submitting this application, the applicant is agreeing to be bound by and comply with the USBC Bylaws, Rules, and Policy Manuals, of your card. Applicant also consents to the inclusion of his/her name, local association and scores on BOWL.com NOT VALID UNLESS SIGNED BY LEAGUE SECRETARY New USBC Member □ **USBC ADULT MEMBERSHIP APPLICATION** New to Association **TEMPORARY MEMBERSHIP Bowling Center** League/Tournament Name RECEIPT Member ID# (found on last year's card) Last Name First Initial Suffix Member ID# Mailing Address Apt. Full Name Male 🔲 Female 🗀 City State Zip Code League Primary Phone Number Secondary Phone Number Date of Birth (mm/dd/yyyy) Membership Type I do not wish to receive non-USBC communication Email Address **MEMBERSHIP CHOICES** Amount Paid ☐ Standard State & Local Only □USBC Life Member □USBC Hall of Fame Local Only □ Local Life Member None

Signature - League Secretary

Date purchased

Please retain receipt until official card is delivered in the mail.

Visit the "Find a Member" section on BOWL.com to print a copy
of your card.

NOT VALID UNLESS SIGNED BY LEAGUE SECRETARY

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Bowling Center

IF NOT PAYING DUES WITH THIS APPLICATION, PLEASE INDICATE WHERE YOU PAID YOUR DUES: Paid on BOWLcom 🚨 Paid in other League 🚨

Signature

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Name of League