

**APPLICATION FOR ILLINOIS STATE USBC WBA AWARDS  
2009 – 2010 LEAGUE AWARDS ONLY**

Award <b>75 Pins Over Average Laminated Bookmark A single game (one per season)</b>	Code: <b>01</b>	Award <b>100 Pins Over Average (charm) only one game one per season</b>	Code: <b>02</b>	Award <b>150 Pins Over Average Bag Tag (3 game series) one per season</b>	Code: <b>03</b>
<b>250 game-180 or less avg (one per season)</b>	<b>04</b>	<b>275-299 game scratch scores only (one per season)</b>	<b>05</b>	<b>675-699 series scratch scores only (one per season)</b>	<b>06</b>
<b>300 Game (one time award) Subsequent 300 game letter of congratulations.</b>	<b>07</b>	<b>700 Series (one time award) Subsequent 700 series letter of congratulations.</b>	<b>08</b>	<b>800 Series (one time award) Subsequent 800 series letter of congratulations.</b>	<b>09</b>

Please mail applications to: Illinois State USBC WBA  
Unit 22, 1224 Towanda Avenue  
Bloomington, IL 61701

When using this form, please use one form per bowler! If a bowler has only one award, then only one space is used and the information is filled in completely. If a bowler has three awards, then all three spaces are used, and all three are completely filled out.

**DO NOT LEAVE INFORMATION BLANKS EMPTY, EVEN IF YOU HAVE TO REPEAT INFORMATION. (ALL SCORES MUST BE BOWLED IN CERTIFIED ILLINOIS LEAGUES).**

The bowler's average must be for at least 21 games in a season. Bowlers are eligible for one award (August 1 to July 31) see application codes or call Illinois USBC WBA Office with questions.

Association # \_\_\_\_\_ Association Name \_\_\_\_\_

1. Bowlers Name \_\_\_\_\_ Bowler ID Number \_\_\_\_\_  
Address \_\_\_\_\_  
Code \_\_\_\_\_ Average \_\_\_\_\_ Game Score \_\_\_\_\_ Series Score \_\_\_\_\_  
Date Bowled \_\_\_\_\_
2. Bowlers Name \_\_\_\_\_ Bowler ID Number \_\_\_\_\_  
Address \_\_\_\_\_  
Code \_\_\_\_\_ Average \_\_\_\_\_ Game Score \_\_\_\_\_ Series Score \_\_\_\_\_  
Date Bowled \_\_\_\_\_
3. Bowlers Name \_\_\_\_\_ Bowler ID Number \_\_\_\_\_  
Address \_\_\_\_\_  
Code \_\_\_\_\_ Average \_\_\_\_\_ Game Score \_\_\_\_\_ Series Score \_\_\_\_\_  
Date Bowled \_\_\_\_\_

I certify that the above information is correct \_\_\_\_\_

Signature of League Secretary

I hereby certify that all bowlers listed on this form are members of the Illinois USBC WBA having paid the \$1.00 membership fee for 2009-10 bowling season.

Signature of Association Manager \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**FORMS ARE TO BE SUBMITTED TO OFFICE WITH A 20 DAY TIME FRAME**

**PLEASE DISCARD ALL OLD FORMS ISSUED PRIOR TO 6/22/2009**

Revised 6/22/09

