



MISSISSIPPI STATE USBC
BOARD MEMBER APPLICATION

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Association: _____

POSITION YOU ARE APPLYING FOR: (PLEASE CIRCLE ALL THAT APPLY)

President

Vice President

Director

ASSOCIATION/BOWLING EXPERIENCE

List previous board 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 my 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 or email completed application to the Nominating Committee Chair:

Tony Engels
3521 Galloway Ave
Jackson, MS 39216

ambengels@aol.com

Deadline to submit application is June 1