Southern Nevada USBC Association Delegate Application Form

Select one or both of the following	ing delegate options: National State				
Name	Date Tel	. <u> </u>	-		
E-mail address					
Signature		Yes	No		
Are you a member of the Southe	ern Nevada USBC Association?				
Are you now a member of a Sou	uthern Nevada USBC Sanctioned league?				
Have you been elected as a dele, etc.)?	egate representing any other association (state, local,				
If elected as a delegate, are you SNUSBCA at your own expense	prepared to travel to the convention city to represent				
Please list your activities in bow	vling				
National Level					

	1 (auona)					
Office held	Years	Commit	tees			
State Level						
Office held	Years	Years Committees				
Local Level						
Office held	Years	Commit	Committees			
League Level						
Office held	Years	Office held	Years			

Please fill out this form and mail it to SNUSBCA, 7231 West Charleston Blvd., Suite 130, Las Vegas, NV 89117. Document must be received not later than June 15th of current year.