



**INDIANAPOLIS HALL OF FAME
MERITORIOUS SERVICE RESUMÉ**

NAME: _____ Birth Date: _____

ADDRESS: _____

TELEPHONE: _____ Closest Relative: _____

Telephone: _____

RESUMÉ SUBMITTED BY: _____

PLEASE PROVIDE ALL INFORMATION POSSIBLE ON THE PERSON BEING NOMINATED. IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH INFORMATION ON BLANK SHEET OF PAPER.

RETURN APPLICATION TO:

HALL OF FAME RECORDER
INDIANAPOLIS HALL OF FAME COMMITTEE
6433 E. WASHINGTON STREET, SUITE 144
INDIANAPOLIS, IN 46219

**DEADLINE DATE:
JANUARY 15**

MERITORIOUS SERVICE CATEGORY

MERITORIOUS SERVICE QUALIFICATIONS:

- Nominee must have: (1) served as a Board member for the local Indy USBC/GIBA/IWBA for a minimum of 15 years; or (2) served in an instructional position (Youth or Adult) for a minimum of 15 years.
- Other categories for Meritorious Service are: (1) SPONSORS for their long-term financial support; (2) WRITERS AND SPORTSCASTERS for their long-term promotion of bowling; or (3) PROPRIETORS for their long-term dedication to the bowlers and the sport of bowling in the City of Indianapolis.
- VOLUNTEERSX for their long-term dedication to either the GIBA/IWBA or Indy USBC Bowling Associations for a minimum of fifteen (15) years; nominees over the age of sixty-two (62) will be moved to the Senior-Meritorious Service category.

BOARD OF DIRECTOR SERVICE:

NUMBER OF YEARS	SERVICE	LOCAL	STATE	NATIONAL
	PRES./SEC./TREAS OR ASSOC. MANAGER:			
	1ST VP/2ND VP/SGT-AT-ARMS:			
	DIRECTOR:			

**** NOTE: PROMOTION INCLUDES ORGANIZATION OF BLIND LEAGUES, HJ/C LEAGUES, NEW LEAGUES – TOURNAMENT PROMOTION AT THE CITY/STATE/NATIONAL LEVELS – NEWS PROMOTIONS, RELATIONSHIPS WITH CIPBA/BPAA/STATE WBA/STATE BA**

NEW PROGRAMS INITIATED OR PROMOTION OF THE SPORT:

NUMBER OF YEARS	SERVICE	LOCAL	STATE	NATIONAL

COMMITTEES

NUMBER OF YEARS	COMMITTEES ON WHICH NOMINEE SERVED AS CHAIRMAN	LOCAL	STATE	NATIONAL



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NUMBER OF YEARS	COMMITTEES ON WHICH NOMINEE SERVED AS A MEMBER	LOCAL	STATE	NATIONAL

OTHER ORGANIZATIONS:

NUMBER OF YEARS	SERVICE	LOCAL	STATE	NATIONAL
	YOUTH (AJBC/YABA):			
	BOARD OF DIRECTORS:			
	PRESIDENT/SECRETARY/TREASURER:			
	VICE PRESIDENT:			
	SGT-AT-ARMS:			
	DIRECTOR:			
	COMMITTEES SERVED AS CHAIRMAN:			
	COMMITTEES SERVED AS MEMBER:			

	CENTRAL INDIANA BOWLING CENTERS ASSOCIATION:	LOCAL	STATE	NATIONAL
	BOARD OF DIRECTORS:			
	PRESIDENT/SECRETARY:			
	VICE PRESIDENT:			
	DIRECTOR:			
	COMMITTEES SERVED AS CHAIRMAN:			
	COMMITTEES SERVED AS MEMBER:			

	BOWLING COUNCIL:	LOCAL	STATE	NATIONAL
	BOARD OF DIRECTORS:			
	PRESIDENT/RECORDER:			
	VICE PRESIDENT:			
	DIRECTOR:			
	COMMITTEES SERVED AS CHAIRMAN:			
	COMMITTEES SERVED AS MEMBER:			



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OTHER SERVICE:

NUMBER OF YEARS		LOCAL	STATE	NATIONAL
	LOCAL TELLER:		N/A	N/A
	STATE TELLER:	N/A		N/A
	NATIONAL TELLER:	N/A	N/A	
	NATIONAL ASST. SGT-AT-ARMS:	N/A	N/A	
	WBA ASST. SGT-AT-ARMS:			N/A
	NATIONAL DELEGATE:	N/A	N/A	
	STATE WBA DELEGATE:	N/A		N/A
	STATE BA DELEGATE:	N/A		N/A

SPECIAL SERVICE:

(I.E., CITY TOUR. SCOREKEEPING, MAKING SPECIAL DECORATIONS, SPECIAL OLYMPICS
OBTAINING DONATIONS FOR BVL, ETC., WORK ON MS TELETHON, PROVIDING COMMUNICATION SERVICES, ETC.)

NUMBER OF YEARS	

OTHER OUTSTANDING SERVICE:

(To include outstanding service as a lane rep; ways & means, high achiever, etc.) Examples:

- Outstanding Service as a Lane Representative
- Outstanding Service in submitting or obtaining year-end league paperwork
- Outstanding Service promoting local, state, or national tournaments

YEAR	

HONORS AND/OR AWARDS *(For Information Only)*:

YEAR	

LIFETIME HIGH AVERAGE: _____

LIFETIME HIGH SERIES: _____

LIFETIME HIGH GAME: _____

NOTE: PLEASE ATTACH ADDITIONAL PAGES, IF NECESSARY.

DATE SUBMITTED: _____

DATE REVISED: _____

DEADLINE DATE: January 15