



**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 191  
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



## INDIANAPOLIS HALL OF FAME MERITORIOUS SERVICE RESUMÉ

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

**OTHER ORGANIZATIONS:**

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

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

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





## INDIANAPOLIS HALL OF FAME MERITORIOUS SERVICE RESUMÉ

### 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**