

# United States Bowling Congress League Application

Please Print. League Application # **389396**

Send application and dues to local processor (local association or center) within 30 days of first league session. DO NOT send directly to USBC Headquarters.

1. Bowling Center \_\_\_\_\_  
Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

2. League Name \_\_\_\_\_ 3. Association Name \_\_\_\_\_

## 4. Type of League

- Adult**  
 Adult Mixed       STANDARD  
 Adult Women       BASIC  
 Adult Men  
 Adult/Youth Mixed
- Youth**  
 Standard       High School  
 Bowlopolis/Bumper  
 USA Bowling

## 4a. Check if applicable

- This is a managed League (See Rule 100j)  
 Scholarship SMART # \_\_\_\_\_  
 Senior League  
 Travel League

## 5. Game Format

- Standard American Tenpin  
 Baker /Scotch Doubles  
 No Tap/3-6-9/Best Ball  
 Bumper

## 5a. Lane Conditions

- Check one  
 House/Standard  
 Challenge  
 Sport

Visit [bowl.com/laneconditions](http://bowl.com/laneconditions) for more information.

6. Teams      Number of Teams \_\_\_\_\_      Number of Players per Team \_\_\_\_\_

7. Date Schedule Begins \_\_\_\_\_      Date Schedule Ends \_\_\_\_\_      Day of Week Bowled \_\_\_\_\_      Time Bowled \_\_\_\_\_      # Weeks League Bowls \_\_\_\_\_  
(Month / Day / Year)      (Month / Day / Year)

8. League Secretary/Manager/Youth Official      ID# \_\_\_\_\_       Male       Female

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email \_\_\_\_\_

Jr./Sr./III \_\_\_\_\_  
Primary Phone \_\_\_\_\_  
Secondary Phone \_\_\_\_\_

9. League President/Youth Supervisor      ID# \_\_\_\_\_       Male       Female

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email \_\_\_\_\_

Jr./Sr./III \_\_\_\_\_  
Primary Phone \_\_\_\_\_  
Secondary Phone \_\_\_\_\_

10.  Mark here if League Secretary is also the Treasurer.  
ID# \_\_\_\_\_      Email \_\_\_\_\_

League Treasurer First Name, Initial, Last Name, Jr./Sr./III \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
League Treasurer Primary # \_\_\_\_\_      League Treasurer Secondary # \_\_\_\_\_

To Be Completed by Youth and/or Adult Youth Leagues  
12.  Mark here if the Adult Representative is the same as the Youth Supervisor.  
ID# \_\_\_\_\_      Email \_\_\_\_\_

Adult Youth Representative First Name, Initial, Last Name, Jr./Sr./III \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Adult Youth Representative Primary # \_\_\_\_\_      Adult Youth Representative Secondary # \_\_\_\_\_

## 11. Bonding, Burglary and Holdup Insurance

Estimated total league funds NOT INCLUDING lineage fees      \$ \_\_\_\_\_  
(Prize money, salaries, expenses, etc., (if none enter zero))

I acknowledge it is my responsibility to protect the league funds and perform my duties as found in the USBC Playing Rules book, Rule 102c.

Signature of League President \_\_\_\_\_      Date \_\_\_\_\_

The USBC insurance and bonding program affords coverage for league officers. No coverage is provided for funds lost due to bowling center insolvency or liquidation.

**PLEASE REFER TO THE BONDING CHAPTER IN THE USBC PLAYING RULES.**