

# United States Bowling Congress League Application

Please Print. League Application #

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
[ ] String Pinsetters
[ ] Baker /Scotch Doubles
[ ] No Tap/3-6-9/Best Ball
[ ] Bumper

5a. Lane Conditions
Check one
[ ] House/Standard
[ ] Challenge
[ ] Sport
Visit 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 \_\_\_\_\_

8. League Secretary/Manager/Youth Official ID# \_\_\_\_\_ - \_\_\_\_\_ [ ] Male [ ] Female
First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Jr./Sr./III \_\_\_\_\_
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Primary Phone \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Secondary Phone \_\_\_\_\_
Email \_\_\_\_\_

9. League President/Youth Supervisor ID# \_\_\_\_\_ - \_\_\_\_\_ [ ] Male [ ] Female
First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Jr./Sr./III \_\_\_\_\_
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Primary Phone \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Secondary Phone \_\_\_\_\_
Email \_\_\_\_\_

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.

Local Association Use Only MA0009 4/18 Application Received \_\_\_\_\_ Date \_\_\_\_\_

# United States Bowling Congress League Application

Please Print. League Application # \_\_\_\_\_

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  
 String Pinsetters  
 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 \_\_\_\_\_ Jr./Sr./III \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Primary Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Secondary Phone \_\_\_\_\_  
Email \_\_\_\_\_

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

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Jr./Sr./III \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Primary Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Secondary Phone \_\_\_\_\_  
Email \_\_\_\_\_

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.**