

REQUIREMENTS
Nominations for the Florida Lifetime Achievement Award

If you wish to submit the name(s) of a candidate for the Florida State United States Bowling Congress, Inc.'s Florida Lifetime Achievement Award, please complete the enclosed nomination form(s) and **submit to EACH of the following no later than JUNE 30th**:

Florida State USBC:	<u>Chairperson</u>	<u>President</u>	<u>Association Manager</u>
	Michael Nyitray	Fred McFarland	Katheryn Auton
	6687 NW 110 Way	11491 6 th Avenue	P. O. Box 1166
	Parkland, FL 33076	Punta Gorda, FL 33955	Dade City, FL 33526-1166
	worldmike@aol.com	derdriver@aol.com	floridastateusbc@gmail.com

RULES AND REGULATIONS GOVERNING APPLICATION FOR AWARD:

1. The FLORIDA STATE USBC's "FLORIDA LIFETIME ACHIEVEMENT AWARD" will have the following requirements:
2. The FSUSBC Hall of Fame Committee will select no more than one (1) nominee each year to be presented to the Florida State USBC Board of Directors for final approval.
 - a. **"FLORIDA LIFETIME ACHIEVEMENT AWARD"**: For individuals unable to meet the minimum ten (10) FLUSBC State Tournament participation requirement to be eligible for the FLUSBC Hall of Fame eligibility. Must have made an exceptional impact to the Florida bowling community in either Performance, Service, or both.
(See qualification requirements on form.)
2. ELIGIBILITY #1: Nominees in either category must be or have been a member in good standing for at least ten (10) years in the Florida State USBC. The nominee does not have to be active at the time of his/her election.
3. ELIGIBILITY #2: Nominees must have been a resident of Florida for a minimum of (20) twenty years. The nominee does not have to be active at the time of his/her election.
4. ELIGIBILITY #3: Nominees must meet FLUSBC Hall of Fame requirements, though they may be combined from both Superior Performance and Meritorious Service achievements.
5. Any Florida State USBC member may submit a nomination. Nominees may be from your own local association or from any other association in the State of Florida. Nominations must be submitted by someone other than the nominee.
6. A nominee may be elected only once for the FLUSBC "Florida Lifetime Achievement Award".
7. Incomplete applications will not be considered.
8. Nominees not elected will NOT be carried forward. Anyone may be resubmitted in the future.
9. **AT LEAST ONE (1) LETTER OF RECOMMENDATION FROM A LOCAL USBC ASSOCIATION MUST BE INCLUDED WITH THE APPLICATION!**
10. **QUALIFICATIONS MUST BE WRITTEN AND SUBMITTED VIA MAIL OR ELECTRONICALLY BY: **JUNE 30th****

FLORIDA STATE USBC, INC.

FOR

“FLORIDA LIFETIME ACHIEVEMENT AWARD”

FILL OUT THIS FORM COMPLETELY - USE ADDITIONAL SHEETS, IF NECESSARY

Name _____ USBC ID# _____ Phone # _____

Address _____ City _____ ST _____ Zip _____

ELIGIBILITY REQUIREMENTS:

Email _____

- #1) FLORIDA USBC MEMBERSHIP - To be eligible for the Florida State USBC’s “Lifetime Achievement Award”, applicants must be or have been a USBC member in the State of Florida in good standing for at least TEN (10) years. Youth applicants must be Florida USBC member for FIVE (5) years. The nominee does not have to be active at the time of his/her election.
- #2) FLORIDA RESIDENCE - To be eligible, adult applicants must have been a Florida resident for at least TWENTY (20) YEARS or more during their time of achievement and/or service. Youth applicants must have been a Florida resident for at least FIVE (5) YEARS during their time of achievement and/or service.
- #3) Must also meet at least THREE (3) of the eight FLUSBC Hall of Fame Superior Performance categories described below to be eligible.
- #4) Must have been an exceptional contributor to the Florida bowling community in either Performance, Service, or both.
- #5) Though not required, induction into at least ONE (1) Florida local USBC association Hall of Fame will have a priority over nominees not in a Florida local Hall of Fame.
- #6) Current FLUSBC Hall of Fame inductees are NOT eligible for the “Florida Lifetime Achievement Award” as this recognition is only available for individuals unable to participate in a minimum of TEN (10) FLUSBC State Tournaments.

Number of years bowled in Florida: _____ Number of years a resident of Florida: _____

- 1 -	- 2 -	- 3 -	- 4 -	- 5 -	- 6 -	- 7 -	- 8 -
300 Games	800 Series	SCORING RECORDS	ANNUAL STATE HIGH SERIES	Local (FL) Hall of Fame	FLUSBC State Titles	Local (FL) Association Titles	Team USA Member
MEN 30 - 300s	MEN 15 - 800s	(3-game series) Current or Past	(3-game series) Current or Past	Inducted into one (1) local USBC HOF for same category of FL State HOF application	3 - State Titles	10 - Local Association Titles	One (1) time member, or alternate member, of Team USA
WOMEN 8 - 300s	WOMEN 2 - 800s	1 - Association Record	---		---	Any combination of Singles or All-Events Titles	
		1 - House Record	ANNUAL STATE HIGH AVERAGE (66-games or more) Current or Past		WOMEN 1 - Florida Queens Title		

(Please circle or identify any of the eight Superior Performance categories the nominee has met)

List all ABC/OPEN/WIBC Championships, Florida State USBC and Local USBC tournaments won as a resident of Florida. Please list the events, years and scores.

List all other tournaments won in Florida as a resident of Florida. Please list the event, year and score.

List scores (number) and years of the following / Only averages of 66 games or higher will be considered:

List Top 3 Florida Highest Averages	<u>Score</u>	<u>#Games</u>	<u>Season</u>		<u>Score</u>	<u>How Many</u>	<u>Years</u>
High Average:	_____	_____	_____		Highest Game:	_____	_____
High Average:	_____	_____	_____		Highest Series:	_____	_____
High Average:	_____	_____	_____				

List any national or regional titles, top-10 finishes and national finalist finishes while a Florida resident. (Professional Tournaments, ABC/USBC Open Championships, etc:

List all SERVICE performed for the betterment of bowling while a Florida resident. You can also utilize this section to provide ANY additional information:

If necessary, attach additional sheet for information.

Submitted by: _____ Signature: _____

Address: _____ E-Mail: _____

City/State/ZIP: _____ Cell Phone: _____

This form needs to be returned no later than **JUNE 30th.**