



PENNSYLVANIA STATE WOMEN'S BOWLING ASSOCIATION, INC.  
**SUPERIOR PERFORMANCE**

Name of Candidate \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Association \_\_\_\_\_ ZIP \_\_\_\_\_

QUALIFICATIONS; (Answer all questions)

\_\_\_\_\_ Years sanctioned with PSWBA (At least 15)

\_\_\_\_\_ Sanctioned average of 175 or higher (At least 6 years)

\_\_\_\_\_ Highest Average \_\_\_\_\_ Highest Game \_\_\_\_\_ Highest Series

\_\_\_\_\_ Years participation in PSWBA Tournament (At least 6)

PSWBA Championships. List event(s). Team, Doubles, Singles, All Events and year(s) won.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Championships. Local, National, 500 Club, 600 Club, TV, Mixed Doubles, Senior, etc. List event and year won.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List other High Scores and Awards i.e. 700 series, 800 series, 275 or better games and other awards won.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other qualifications: Attach a separate sheet.

I hereby agree to have my name submitted for induction into the PSWBA Hall of Fame:

\_\_\_\_\_  
(Signature) (Date)

I hereby nominate the above person to be considered as an inductee into the PSWBA Hall of Fame. To the best of my knowledge, all of the above information is true and correct.

Submitted by: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Association: \_\_\_\_\_

Date: \_\_\_\_\_