

# WEST VOLUSIA USBC ASSOCIATION

## APPLICATION FOR ELEVEN STRIKES IN A ROW GAME (299 OR LESS)

Forward this application to the Association Manager within 20 days

Bowling Center: \_\_\_\_\_ Competition Name: \_\_\_\_\_

Competition Official: \_\_\_\_\_ Signature: \_\_\_\_\_

This award is available once in a lifetime. Bowlers who have previously earned the award have the option to purchase one at award cost.

Bowler Name: \_\_\_\_\_ National ID Number: \_\_\_\_\_  
Last Name First Name MI

Date Bowled: \_\_\_\_\_  
MM / DD / YY Game 1 Game 2 Game 3 Series Total Average No. of Games

### **Bowler Certification:**

- I have not received an 11-in-a-row award in my lifetime.
- I have previously received an 11-in-a-row award in my lifetime and wish to purchase this award. I will be advised of the cost for the award. Payment would be due upon this notification.
- I have previously received an 11-in-a-row award in my lifetime and do not wish to purchase this award.

Bowler Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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