

**MASSACHUSETTS WBA  
M W B A HALL OF FAME  
MERITORIOUS SERVICE NOMINATION FORM**

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Nominee must have distinguished herself through outstanding service to MWBA over a period of at least ten (10) years in promotion and/or organization of the game of American Ten Pins. This may include service on the STATE, NATIONAL, LOCAL and YOUTH/YABA level.  
\*\*\*\*\*

PLEASE TYPE or PRINT Date \_\_\_\_\_  
Name of Nominee: ( ) Miss ( ) Mrs Phone ( ) \_\_\_\_\_

Last Name	First Name	Maiden/Middle Name
Current Address _____		
Street	City & State	Zip Code
E-mail Address _____		

Local and State Association Membership (# of years current and # of years previous)  
\_\_\_\_\_

**SERVICE ACCOMPLISHMENTS**

**STATE**

List offices held, years on MWBA Board of Directors, include length of service in each office, all committees (designate if chairperson) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List work at state level in Youth organization (officer, director, delegate) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List work with other state and/or regional organizations ( 500 Club, 600 Club, NEWBA, WASA, NWBW, BPAA, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LOCAL**

List service as local association officer, director, with youth association, bowling council, publicity committee, tournament director, etc. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

