## Southern Nevada USBC Association Delegate Application Form

Select one or both of the follow	ing delegate options: N	Vational State		
Name	Date	Tel ( )		
E-mail address				
Signature			Yes	No
Are you a member of the South	ern Nevada USBC Associati	on?		
Are you now a member of a Sou	uthern Nevada USBC Sancti	oned league?		
Have you been elected as a dele etc.)?	gate representing any other	association (state, local,		
If elected as a delegate, are you SNUSBCA at your own expense		vention city to represent		
Please list your activities in bow	vling			
	National Level			
Office held	Years	Committees		
	State Level			
Office held	Years	Committees		

State Level						
Office held	Years		Committees	5		
Local Level						
Office held	Years Committee		Committees	\$S		
League Level						
Office held	Years		Office held	Years		

Please fill out this form and mail it to the Nominating Chairperson, SNUSBCA, 3111 So. Valley View Blvd., Ste. O-102, Las Vegas, NV 89102 to be received not later than May 1st.