

USBC ASSOCIATE MEMBERSHIP FEES COLLECTED



THOSE LISTED PAID - INDICATE APPROPRIATE USBC ASSOCIATE PRODUCT PURCHASED IN PROPER COLUMN

NAME	ADULT	YOUTH	BOWLER'S STREET ADDRESS	CITY/STATE/ZIP	PURCHASE DATE
	Check One				
1	<input type="checkbox"/>	<input type="checkbox"/>			
2	<input type="checkbox"/>	<input type="checkbox"/>			
3	<input type="checkbox"/>	<input type="checkbox"/>			
4	<input type="checkbox"/>	<input type="checkbox"/>			
5	<input type="checkbox"/>	<input type="checkbox"/>			
6	<input type="checkbox"/>	<input type="checkbox"/>			
7	<input type="checkbox"/>	<input type="checkbox"/>			
8	<input type="checkbox"/>	<input type="checkbox"/>			
9	<input type="checkbox"/>	<input type="checkbox"/>			
10	<input type="checkbox"/>	<input type="checkbox"/>			

TOTAL ADULT ASSOCIATE MEMBERS _____

TOTAL YOUTH ASSOCIATE MEMBERS _____

TOTAL ASSOCIATE FEES REMITTED \$ _____

MEMBERSHIP CARDS WILL BE MAILED ONLY TO THOSE INDIVIDUALS WHO HAVE PAID ASSOCIATE DUES.

USBC PARTICIPATION FEES COLLECTED

(NOTE: NOT APPLICABLE TO MORAL SUPPORT TOURNAMENTS)

NAME	ADULT	YOUTH	BOWLER'S STREET ADDRESS	CITY/STATE/ZIP
	Check One			
1	<input type="checkbox"/>	<input type="checkbox"/>		
2	<input type="checkbox"/>	<input type="checkbox"/>		
3	<input type="checkbox"/>	<input type="checkbox"/>		
4	<input type="checkbox"/>	<input type="checkbox"/>		
5	<input type="checkbox"/>	<input type="checkbox"/>		

Forward To: USBC
 Membership/Awards Team
 621 Six Flags Dr
 Arlington, TX 76011

TOTAL PARTICIPATION FEES REMITTED \$ _____

MEMBERSHIP CARDS WILL NOT BE ISSUED TO BOWLERS WHO PAID USBC PARTICIPATION FEES.