



Illinois USBC Youth Association
COACH OF THE YEAR
NOMINATION FORM

Nominee's Name: _____

Address: _____

City, State and Zip Code: _____

Phone Number: (_____) _____ Email (if known) _____

Local USBC Association: _____

Bowling Center(s) nominee coaches at: _____

Number of years coaching youth bowlers: _____

Registered Volunteer? (Circle one) Yes No If Yes, date expires: _____

Level I, Bronze, Silver or Gold level instructor certificate # & year earned: _____

Occupation and Title: _____

Please write a statement on the nominee's history, service and accomplishments (use additional sheet, if needed). _____

Nominator's name: _____

Address: _____

City, State and Zip Code: _____

Phone Number: (_____) _____ Email: _____

Your affiliation/relationship with the nominee: _____

Please sign and date: _____ Date _____

Please attach any letters of recommendation (i.e. Association Board members, employers, clergy, etc.)

Mail to:

ILUSBCYA Coach of the Year
Patti Mauerman
25765 Eastpoint Rd., Tremont, IL 61568
pattimauerman@gmail.com

THE DEADLINE FOR FILING AN APPLICATION FOR CONSIDERATION FOR THE NEXT IUSBCYA COACH OF THE YEAR IS APRIL 1, 2016.