## Notify league processor within 48 hours of 300 game or 800 series. Application must be submitted to league processor within 20 days of score.



YOUTH HIGH SCORE APPLICATION: 11in-a-row, 300 Game and 800 Series.

ORDER CANNOT BE PROCESSED UNLESS ALL FIE					
Center Name:	Center #:			Competition Type (Check one)	
Center Address:				League Tournament	
Address	City/State/Zip		$ \mid$ $\vdash$	Interscholastic	
Competition Name:	Compet	ition #:		Modified Format	
Companiel - Official		W		(Scoresheet Attached)	
Competition Official: Print Name	Address City/State/Zip		/Zio Notes: 5	Notes: See USBC Playing Rule 3 fo modified competition formats.	
		City/State	, Ep	rea competition formats.	
Bowler's Name:		Me	ember ID#		
Bowler's Address:	First Name	IM			
Add	ress	Apt #		City/State/Zip	
Day Phone:		Date	e of Birth:		
E-mail:					
Gender: Female Male	Bowled with: [	Right Hand	Left Hand		
Date Bowled:				-22-11-57-6	
MM DD YEAR	Game 1	Game 2	Game 3	Series Total	
Ball Manufacturer	Ball Model		Average	No. of Games	
Series Number on Ball: Yes No	Were rules observed when score wa		was bowled?	Yes No	
	Was/were	the game(s) pre/po	st bowled?	Yes No	
Competition Official Signature:X					
LISBC Vouth members have t	no obligation to be				
USBC Youth members have to in place by his/her high school athletic association.	itions that may affeations on awards th	ct any outside com	ctions that may lipetitions they co	be ould compete in or	
		1800			
Bowler's Signature:X					

To submit application for approval, you can fax the form to 817-385-8260 or scan and email the file to bowlinfo@bowl.com \*NOTE Once your achievement is approved, awards may be purchased at KeepsakeBowling.com or USBCBowlingAwards.com