



GREATER RACINE AREA USBC

CANDIDATE FORM

DIRECTORS/OFFICERS/DELEGATES

Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ USBC #: _____ - _____

I consent to have my name placed into nomination for: All candidates must be 14 years of age or older.

Vice-President _____

Director #10 _____

Director #5 _____

State Delegate _____

Director #8 _____

National Delegate _____

Director #9 _____

Please check if you have any knowledge or experience of the following;

Member of the Greater Racine Area USBC _____ League Sec/Officer _____

Knowledge of USBC Rules _____ Knowledge of Roberts Rules of Order _____

Officer or Director in an Association _____ Officer or Director in any State Association _____

Agree to sign Commitment form _____ Agree to sign Code of Ethics _____

Must follow all By-Laws of the Greater Racine Area USBC _____

Any special skill sets (ex; finances, marketing) _____

Signature of Candidate _____ Date _____

Please return this application to Association Manager Glenn Chapman @ 1410 Harrington Dr. Racine, WI 53405

Rbaworks4u@aol.com or twored300@att.net

MUST BE RETURNED BY MARCH 1st, 2025