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 FIELDS ARE COMPLETE.

Center Name:	Center #:			Competition Type (Check one)		
Center Address:				League Tournament		
Address	Address City/State/Zip		ip	Interscholastic		
Competition Name:	Competition #:			Modified Format		
Competition Official: Print Name	Address	City/Sta	ate/Zip	(Scoresheet Attached) Notes: See USBC Playing Rule 3 for modified competition formats.		
Bowler's Name:			Member ID	#		
Bowler's Address:	First Name	MI				
Day Phone:		Apt Da	t# ate of Birth	City/State/Zip		
E-mail:						
Gender: Female Male	Bowled with:	Right Hand	Le	eft Hand		
Date Bowled: MM DD YEAR	Game 1	Game 2	Gam	se 3 Series Total		
Ball Manufacturer	Ball Mod	 del	Avera	age No. of Games		
Series Number on Ball: Yes No	Were rules obse	erved when score				
	Was/were the game(s) pre/post bowled? Yes No					
Competition Official Signature:X						
USBC Youth members have th in place by his/her high school athletic associat limita	-	ct any outside co		·		
Bowler's Signature:X	Called H. C.					
l veri	ify that all information r	elative to the High S	core bowled i	is correct.		

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