

MID-MINNESOTA USBC ASSOCIATION

ASSOCIATION MANAGER APPLICATION

(Please type or print clearly in blue or black ink.)

APPLICANT INFORMATION

Name _____	
Address _____	
Phone _____ Day Evening	
Email Address _____	
Are you under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, explain nature of crime, date or conviction and state in which convicted.	
(Convictions are not an automatic bar from service.) _____	

ASSOCIATION HISTORY – List present or most recent State or Local Association positions. Complete even if accompanied by a resume.

Association Name _____	
Position Held _____ Length of Service _____	
Describe Duties _____	
Reason for Leaving _____ May we contact this association? _____	

Association Name _____	
Position Held _____ Length of Service _____	
Describe Duties _____	
Reason for Leaving _____ May we contact this association? _____	

(If more space is needed, please attach additional pages.)

