

USBC Association Name

## Board Member Names



Revised 4-10-24

	Term Expires 20 ____					Term Expires 20 ____					Term Expires 20 ____					Term Expires 20 ____				
<b>Demographics</b>																				
<i>Male</i>																				
<i>Female</i>																				
<i>Other</i>																				
<i>18-30 years</i>																				
<i>31-40 years</i>																				
<i>41-50 years</i>																				
<i>51-60 years</i>																				
<i>61-70 years</i>																				
<i>&gt; 71 years</i>																				
<b>Ethnicity</b>																				
<i>Caucasian</i>																				
<i>African American</i>																				
<i>Latino</i>																				
<i>Asian</i>																				
<i>Other</i>																				
<b>Knowledge of:</b>																				
<i>Budgets / Audits</i>																				
<i>Coaching</i>																				
<i>Fundraising</i>																				
<i>League Officer</i>																				
<i>Marketing / Communication</i>																				
<i>Sales / Retail</i>																				
<i>Social Media</i>																				
<i>Tournaments / Event Planning</i>																				
<b>Interest with:</b>																				
<i>Awards Committee</i>																				
<i>Event Committee</i>																				
<i>Finance Committee</i>																				
<i>Tournament Committee</i>																				
<i>Youth Committee</i>																				



**THANK YOU  
FOR TAKING  
A MOMENT  
TO COMPLETE  
THIS FORM.**

## VOLUNTEER INFORMATION

We ask that you complete this information form to assist the association president in knowing the specific talents and interests to achieve success and fulfillment from your volunteer activities. Also included in this questionnaire is information to obtain feedback for training, scheduling meetings and other information to assist the association in being as effective and efficient as possible.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Board Position Applying for: \_\_\_\_\_

Are you currently employed?    **Yes**                      **No**                      **Retired**

What is your current or most recent position (if retired)? \_\_\_\_\_

What days of the week do you work?            **M-F Days**                      **M-F Nights**                      **Weekends**

What do you know about our organization?

Why do you want to volunteer for our organization?

What committee(s) are you interested in serving ?    **Awards**    **Events**    **Finance**    **Tournaments**    **Youth**

What days and times of the week do you currently bowl?

<b>SUNDAY</b>	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>	<b>SATURDAY</b>
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

Have you ever been a league officer? If so, what position and how long: \_\_\_\_\_

Would you be willing to give up bowling one evening during the week to attend a board meeting if one was scheduled M-F during the evening once or twice a year?    **Yes**                      **No**

Please describe any special talent, areas of interests, certifications or any other special abilities that you feel could be beneficial to the association.