

CREDENTIALS OF DELEGATES  
to the  
MICHIGAN STATE USBC YOUTH  
ANNUAL MEETING

This is to certify that at a regular meeting of the (Association) \_\_\_\_\_  
the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, the following were duly elected as delegates to the  
Annual Meeting of the Michigan State USBC Youth, to be held in Midland, Michigan on July 17, 2010

**Please attach a SEPARATE sheet for any additional (or possible alternate) delegates.**

1. Name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
City/Zip \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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2. Name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
City/Zip \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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3. Name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
City/Zip \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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4. Name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
City/Zip \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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5. Name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
City/Zip \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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Association Membership (2008-09)  
\_\_\_\_\_

Number of Delegates  
\_\_\_\_\_

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Signature of Association Manager

Please complete this form & return to the Michigan State USBC Youth Manager no later than **July 1, 2010**.  
**Forms received after this date cannot be honored.**

Mail completed form to:

Michigan State USBC Youth - 3740 Sioux Ct. - Grandville MI 49418 - FAX: (616) 855-6221  
**THIS FORM CAN BE COMPLETED ON-LINE AT [michiganstateyouthbowling.com](http://michiganstateyouthbowling.com)**