



# 2020-2021 JUNIOR GOLD MEMBERSHIP APPLICATION

USBC YOUTH MEMBERSHIP APPLICATION New Member

Bowling Center: \_\_\_\_\_

League/Tournament Name: \_\_\_\_\_

Email Address (EMAIL ADDRESS REQUIRED FOR PROCESSING): \_\_\_\_\_

## **GUARDIAN INFORMATION**

Guardian's First Name: \_\_\_\_\_ Guardian's Last Name: \_\_\_\_\_

Gender:  MALE  FEMALE Date of Birth(mm/dd/yyyy): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## **BOWLER INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Gender:  MALE  FEMALE Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Bowler ID#(found on last year's card): \_\_\_\_\_

Last 4 digits of Bowler's Social Security Number (Junior Gold Only): \_\_\_\_\_

**By submitting this application you consent to the inclusion of your name, local association and scores on BOWL.com**

I do not wish to receive non-USBC communication

## **MEMBERSHIP CARD OPTIONS**

### **NATIONAL MEMBERSHIP**

- |  |         |
|--|---------|
| <input type="checkbox"/> Youth Standard Membership   | \$4.00  |
| <input type="checkbox"/> U12 Junior Gold Membership<br>(U12 Born 8/1/08 or Later)                  | \$10.00 |
| <input type="checkbox"/> U15/U18 Junior Gold Membership<br>(U15/U18 Born between 8/1/02 - 7/31/08) | \$30.00 |
| <input type="checkbox"/> U20 Adult Junior Gold Membership<br>(U20 Born between 8/1/00 - 7/31/02)   | \$30.00 |

PAID IN OTHER LEAGUE

**TOTAL**

\_\_\_\_\_  
Name of League

\_\_\_\_\_  
Bowling Center

### **METHOD OF PAYMENT**

- |                                |  |
|--------------------------------|--|
| <input type="checkbox"/> VISA  | <input type="checkbox"/> MASTERCARD                  |
| <input type="checkbox"/> CHECK | <input type="checkbox"/> MONEY ORDER/CASHIER'S CHECK |

Account #: \_\_\_\_\_

Exp Date: \_\_\_\_\_

CVV: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Email of card holder: \_\_\_\_\_

Day time tel. # of card holder: \_\_\_\_\_

My signature below authorizes a charge request for \$: \_\_\_\_\_

Signature: \_\_\_\_\_

**DATE RECEIVED BY USBC:** \_\_\_\_\_

### **MAIL FORM TO:**

**USBC JUNIOR GOLD MEMBERSHIP  
621 Six Flags Drive  
Arlington, TX 76011**

Phone: (800) 514-BOWL ext. 8426

Fax: (817) 385-8412

Email: Tournaments@ibcyouth.com