

2023-2024 JUNIOR GOLD MEMBERSHIP APPLICATION

USBC YOUTH MEMBERSHIP APPLICATION New Member

Bowling Center:				
League/Tournament Name:	KANSAS CITY OPEN			
Email Address (EMAIL ADDRESS REQUIRED F	DR PROCESSING):			
GUARDIAN INFORMATION	Į			
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 <u>:</u>	L	ast 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 Secu	ırity Number			
By submitting this application you con I do not wish to receive non-USBC	nsent to the inclusion of your name, local communication	association and scores on BOWL.com		
MEMBERSHIP CARD OPTI	<u>ONS</u>			
NATIONAL MEMBERSHIP		RETURN COMPLETED FORM	1 ТО:	
U12 Junior Gold Membership (U12 Born 8/1/11 or Later)	\$10.00	Email: kcoinfo@kansascityc	pen.com	
U15 Junior Gold Membershi		Or		
U18 Junior Gold Membership (U18 Born between 8/1/05 - 7/31/	\$30.00	PRINT COMPLETED FORM AN AT TOURNAMENT CHEC		