

Application for Membership  
In the Illinois Women's 600 Bowling Club, Inc.  
**\$15.00 Fee Must Accompany this Form**

Office Use Only  
Membership #  
\_\_\_\_\_

**Please Print or Type Information**

_____		_____		
Last Name	First	Middle Intl	Local Assn. USBC/WBA (5 Digit #)	
_____			_____	
Number and Street			Bowler ID #	Score
_____			_____	
City or Town	State	Zip Code	Date Bowled	
_____		_____		_____
Social Security Number	Phone # with Area Code		E-Mail Address	

Check here if membership awards are to be mailed to applicant \_\_\_\_\_  
If not checked, awards will be mailed to address below.

**Note: Only members of the Illinois State USBC WBA are eligible for membership in the Illinois Women's 600 Bowling Club, Inc.**

**VERIFICATION INFORMATION BY:** Local 600 Club Secretary \_\_\_\_\_ Local USBC/WBA Secretary \_\_\_\_\_ (check one)

_____		_____		_____	
Name		Phone # with area code		E-Mail Address	
_____		_____		_____	
Street Address		City	State	Zip Code	
_____		_____	_____	_____	
Local Association Name			Local 600 Club Name		

**SUBMIT THIS FORM ALONG WITH CHECK IN THE AMOUNT OF \$15.00 MADE PAYABLE TO:**

**Illinois Women's 600 Bowling Club, Inc.**  
Myrt Stauche, Executive Director  
38703 Sheridan Road, #190  
Beach Park, Illinois 60099

**Phone # (847)623-9539**  
Email: [m1234s@sbcglobal.net](mailto:m1234s@sbcglobal.net)

**PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS, TEMPORARY RECEIPTS WILL NOT BE MAILED.**