

**2009 INDIANA STATE USBC BA DELEGATES CONVENTION
LOCAL ASSOCIATION DELEGATE REGISTRATION FORM**

*Indianapolis, Indiana
June 26 - 28, 2009*

PLEASE SIGN UP ONLY THOSE DELEGATES THAT PLAN ON ATTENDING THE CONVENTION

Association # _____ Association Name _____

Please list alphabetically. Type or print names — LIST ALTERNATE WHERE INDICATED				
DELEGATES NAME	MAILING ADDRESS – CITY, STATE	ZIP CODE	PHONE NUMBER	E-MAIL ADDRESS
1.				
2.				
ALTERNATE NAME				
1.				

BOTH PRESIDENT AND SECRETARY/EXECUTIVE DIRECTOR MUST SIGN

**Return to: IS USBC BA, 3520 Wynfield Drive, Richmond, IN 47374 or Fax to: 765-939-8641
IMPORTANT NOTICE: Please forward to the IS USBC BA office Postmark no later that *May 15, 2009***

President's Signature

Secretary/Executive Director/Association Manager Signature