

# Superior Curling Club Lifetime Membership Nomination Form

We hereby Nominate the candidate below for Lifetime Membership of the Superior Curling Club.

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*Nominee Name*

The above Nominee is 65+ years old and has been a member of the Superior Curling Club since \_\_\_\_\_.  
*Insert Curling Season or Year  
Example 2023 – 2024*

By signing below we are confirming we have read the Lifetime Membership Policy and Procedures, and understand how the Lifetime Membership Nomination process works. Any questions regarding the process should be addressed with the SCC President or Board of Directors prior to submitting this nomination.

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*Nominator #1*

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*Nominator #2*

Please fill out this form completely and mail to: Superior Curling Club | PO Box 565 | Superior, WI 55840, email form to [housecalls@superiorcurlingclub.com](mailto:housecalls@superiorcurlingclub.com), or give this completed form to any SCC Board Member.

*Nomination Deadline January 1.*

**Club Leadership:** List all positions held within the club, including but not limited to: Board or Committee Member, League Commissioner, Bonspiel Chairperson, Ice Crew, Juniors Curling Coach or Coordinator, and/or Certified Instructor.

**Volunteering:** List the types of volunteering this person is known to have done, such as Season Club Opening or Season Club Closing activities, Bonspiels, Open House or Learn to Curl Events, Junior or Adult Curling Instruction, Facility Management (repair, housekeeping, building or equipment upkeep, etc.), Ice Maker, Ice Crew, etc.

**Curling Instruction and Recruitment:** List how this person has dedicated their time to growing the game both inside and outside the club and actively promoted curling, the Superior Curling Club, and the USCA. Examples would be recruiting new members, advertising, or Open House and Learn to Curl events.

**Bonspiels and Competitive Curling:** List SCC or other bonspiels participated in, any travel to other local, US and/or International club bonspiels, or participation in USCA sanctioned bonspiels such as, but not limited to State, Nationals, Worlds, Olympics, etc.

**Financial Contributions:** List any Financial and/or material contributions to the club this member has made that goes above and beyond regular membership contributions.

**Recognition:** Would you agree that this person would be recognized internally and externally as a “face of the Superior Curling Club” – recognized for their participation and for making other significant contributions to the club?

**Sportsmanship:** Would you agree this person is known for playing fair, honorable, and by the rules of curling etiquette? Someone you would respect on and off the ice, and someone you would want to represent the Superior Curling Club.

Please submit this cover and use additional sheets for the details outlined above.

If unsure of contributions or qualifications, ask members who would be able to help gather this information.

(Teammates, League Commissioners, Club Manager and/or Board of Directors may be able to help or recommend someone you could ask.)

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For SCC Board use only

Date Received: \_\_\_\_\_

SCC Board of Directors Approved: \_\_\_\_\_

Spring Meeting Date Presented: \_\_\_\_\_