



GREATER CHARLESTON

USBC ASSOCIATION



J. Mitchell Bowers, President

Rosie Coulter, Association Manager

Association Manager Job Description & Application

Greater Charleston USBC Association

POSITION SUMMARY: Association Manager is responsible for overseeing the operations of the association, providing administrative support and the coordination of services necessary to comply with USBC Performance Standards. For example: design and implement training, increase membership base and financial stability.

SUPERVISED BY: Reports to and is hired by Association President/Board who will allocate additional human and financial resources on a task basis as necessary. Association Manager reports to Board on a regular basis (at least quarterly); to national as required; and to membership at least once a year.

DUTIES AND RESPONSIBILITIES: In addition to the mandatory requirements in the bylaws, the duties and responsibilities of this position include but are not limited to the following:

- Implement directives of the Association Board (Strategic Planning, Performance Standards, etc.)
- Responsible for membership and awards processing
- Maintaining averages and yearbooks
- Oversee public relations campaigns
- Responsible for organizing special events, tournament, clinics
- Report to those governing bodies as necessary

QUALIFICATIONS: The Association Manager should have knowledge of bowling; management, office and organizational skills; and basic computer skills. Experience with, processing USBC memberships, MS Word and strong communication skills. The Association Manager must be a RVP member, and three years on a bowling association Board are preferred.

EDUCATION AND OTHER REQUIREMENTS:

- High School diploma
- Communication training or experience
- Business Management Skills (finance, marketing, sell programs, organization, planning)
- Knowledge of sport
- Inter-personal relationship skills (customer service)
- Knowledge of current technology (computers, etc)
- Desirable, but not mandatory skills:*
 - Proven promotional abilities/success increasing membership/image of organization



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ASSOCIATION MANAGER APPLICATION FOR GREATER CHARLESTON USBC ASSOCIATION

Applications must be submitted to:

Rosie Coulter
9601 Portal Court
Summerville, SC 29485
rosiegcusbca@hotmail.com

APPLICATION INFORMATION – Please type or print clearly (Use additional paper if needed)

Name (Last, First, Middle)

Street Address

City, State, Zip Code

Daytime Telephone

Evening Telephone

Cell Telephone

e-mail address:

Are you under 18 years of age? Yes or No Do you have a work permit? Yes or NO

Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? Yes or No If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. (Convictions are not an automatic bar from consideration)

Do you have any pending criminal charges against you? Yes or No
If yes, describe 1) nature of crime, 2) date issued, and 3) county and state where issued.

Have you ever been suspended from ABC or WIBC or YABA or USBC? Yes or No If yes please explain

EDUCATION

High School name and location: Number of years attended: Major subjects: Diploma or degree received: Yes or No

College name and location: Number of years attended: Major subjects: Diploma or degree received: Yes or No



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Graduate name and location: Number of years attended: Major subjects: Diploma or degree received: Yes or No

OTHER RELEVANT TRAINING COURSES

Course/Seminar	Sponsoring Organization	Content	Date(s) Attended

EMPLOYMENT / ASSOCIATION HISTORY

Employer / Association:

Position Title:

Address:

City, State, Zip:

Phone Number:

Last Supervisor's Name:

Duties:

Dates of employment from _____ to _____

Reason for leaving:

May we contact this employer/association? Yes or No

Employer / Association:

Position Title:

Address:

City, State, Zip:

Phone Number:

Last Supervisor's Name:

Duties:

Dates of employment from _____ to _____

Reason for leaving:

May we contact this employer/association? Yes or No

Employer / Association:

Position Title:

Address:

City, State, Zip:

Phone Number:

Last Supervisor's Name:

Duties:

Dates of employment from _____ to _____

Reason for leaving:

May we contact this employer/association? Yes or No



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REFERENCES:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

Please carefully read before signing this form

1. All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.

2. I authorize this association to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly release and hold harmless any person or organization that provides information pertaining to my employment or me.

3. I understand that upon receiving a job offer, a physical examination and drug screening may be required.

(Note: If this is a job requirement, you will be notified.)

4. Regardless of whether I become employed by this association, I understand that this application is not and should not be considered a contract of employment. I understand that employment at this association is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the association's, unless specifically provided otherwise in a written employment contract. I further understand that no association employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the association and then only by means of a signed, written document.



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Signature _____ Date _____
