	embership Application mation Clearly and Be Sure to Sign This Application	
THE GOVERNING BODY OF AMATEUR POOL.*  THE GOVERNING BODY OF AMATEUR POOL.*	madon oloany and 20 care to olg. The ripping	Division/Team #
Legal First Name (Required – No Nickname) MI Last Name		Nickname (will print on weekly scoresheet instead of first name)
Mailing Address		
		Male M
City	State/Province Zip Code/Postal Code	<del>-</del>
		Female
Birth Date Home Phone	Cell Phone	
	( <u></u>	_
Month Day Year		
Email Address		
II ADA (ODA C. II O	□ Vee □ Ne	
Have you ever participated in an APA/CPA sanctioned League?  If yes, where?	☐ Yes ☐ No	N.
Do you have a friend who would be interested in APA/CPA		
By becoming an APA/CPA member, I agree my child's information above is true and correct, and agree to the TERMS AND CONDITIONS OF APA/CPA MEMBERSHIP (located at <b>poolplayers.com/terms</b> ). I further agree my child will abide by APA/CPA rules governing participation in APA/CPA Leagues, Tournaments and other activities and events.		

Submit with Annual Membership fee of \$10 (Plus Sales Tax, If Applicable) to your Authorized APA/CPA League Operator! [League Operator: Forward application and fee (plus sales tax, if applicable) to APA within 5 days of receipt.] Fees are non-refundable. American Poolplayers Association, Inc. • 1000 Lake Saint Louis Blvd. • Suite 325 • Lake Saint Louis, Missouri 63367 • poolplayers.com

## **Please Read!**





## **APA/CPA Membership Entitles You To:**

1. Official membership card.

Parent/Guardian Signature\_

- 2. Qualification for APA/CPA Junior League play wherever an organized Junior APA/CPA League is active.
- 3. Play in any APA/CPA sanctioned League or League Tournament for which you qualify.
- 4. Receive trophies and other awards for which you qualify.
- 5. Participate in other special events for APA/CPA Junior members.