



Club Affiliation Form

Please complete the following:

One Year	\$ 50.00
Three Years	\$125.00

CLUB NAME: _____

PLAYING SITE ADDRESS:*

Name of Building: _____

Address: _____

City/State/Zip Code: _____

MAILING ADDRESS:

Correspondent's Name: _____

Address: _____

City/State/Zip Code: _____

Telephone No.: (Home) _____

(Business) _____

CLUB CONTACT:*

Name: _____

Telephone No.: (Home) _____

(Business) _____

E-Mail Address: _____

Club Web Site: _____

CLUB OFFICERS:

President: _____

Telephone No. & E-Mail: _____

Vice President: _____

Telephone No. & E-Mail: _____

Secretary: _____

Telephone No. & E-Mail: _____

Treasurer: _____

Telephone No. & E-Mail: _____

*Unless otherwise requested, this is the information which will appear in USATT publications