

PBA REINSTATEMENT APPLICATION

Please Avoid Errors - Type or Print

NAME:

FORMER PBA #:

USBC #:

CATEGORY YOU ARE APPLYING FOR:

- FULL (\$99 REINSTATEMENT FEE + \$300 ANNUALLY)
 FULL (\$99 REINSTATEMENT FEE + \$25 PER MONTH)

- STANDARD (\$99 REINSTATEMENT FEE + \$144 ANNUALLY)
 STANDARD (\$99 REINSTATEMENT FEE + \$12 PER MONTH)

ADDRESS:

CITY:

STATE:

ZIP CODE:

HOME NUMBER:

CELL PHONE NUMBER:

WORK:

EMAIL ADDRESS:

BIRTHDAY: - -

RIGHT HANDED

LEFT HANDED

SOCIAL SECURITY #:

HOW DO YOU WANT YOUR NAME TO
APPEAR ON YOUR MEMBERSHIP CARD?

PAYMENT INFORMATION (Make Money Orders Payable to PBA)

CREDIT CARDS ACCEPTED:

DISCOVER CARD

MASTERCARD

VISA

CREDIT CARD #:

EXP. DATE: - -

CVV#:

NAME ON CARD:

SIGNATURE:

DO YOU CURRENTLY WORK IN A PRO SHOP? YES NO

IF **YES** PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR LISTING ON PBA.COM

(FULL MEMBERS ONLY)

PRO SHOP NAME:

PRO SHOP ADDRESS:

CITY:

STATE:

ZIP CODE:

NEAREST BOWLING CENTER:

PRO SHOP INTERNET/EMAIL ADDRESS:

PRO SHOP PHONE #:

PRO SHOP FAX #:

PLEASE MAIL OR FAX PBA APPLICATIONS WITH A COPY
OF YOUR DRIVER'S LICENSE TO:

Professional Bowlers Association, Attn: Membership
719 Second Ave, Suite 701, Seattle, WA 98104
Phone: (206) 332-9688 | Fax: (206) 332-9722

