



BOWLING PROPRIETORS' ASSOCIATION OF AMERICA, INC.

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CSBPA MEMBERSHIP APPLICATION

This application is being made under the following terms and conditions:
That membership is on a calendar basis, January 1 through December 31

REGULAR MEMBERSHIP CATEGORY (through state or local association)

That as a prerequisite to BPAA membership, membership will also be applied for in the local and/or state bowling proprietor associations where the establishment is located and applicable dues paid.

BPAA National and Colorado State dues are \$41 per lane per year.

NAME: _____ **ESTABLISHMENT:** _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE: () _____ **FAX:** () _____

E-MAIL: _____

OF LANES: _____ *Please Indicate: NO. OF TENPIN LANES* _____

TOTAL LANES IN CENTER: _____ **x \$41 = Total Amt. Due: \$** _____

Please Check One:

Enclosed is my check made payable to **BPAA**. Check # _____
(Please have check accompany this application; **U. S. dollars only.**)

-or-

Credit card: _____ VISA _____ M/C _____ AMEX _____ Discover

Card #: _____ **Exp. Date:** _____

If you are paying with VISA – please supply the 3-digit number from back of card. _____

Cardholder Name: _____

Signature: _____