

2219 E. Thousand Oaks Blvd. Suite 102 #287 Thousand Oaks, CA 91901 Office - 615-859-9722 Fax - 619-320-6381

## WPBA PLAYER MEMBERSHIP FORM

Date:		
Name:		
Address:		
		Zip:
Phone Number:		_ Cell # :
Social Security Numb	er:	
E-mail Address:		
	Annual membership	lis year end rankings). o fee is \$250. lified for one or more events season.
Tour who Conditions the WPBA sanctioned director). the WPBA qualifies fo	) or receive a \$10 discond Regional Tour (by payi Regional tours are eligil U.S. Open. If a condition	•

Please print and complete form and mail or fax membership fee to:

WPBA – Membership 2219 E. Thousand Oaks Blvd. Suite 102, #287 **Thousand Oaks, CA 91362** 

Phone: (615) 859-9722 Fax: (619) 659-2168