

Membership (Please Print clearly)			Date	
Member Na	ame:			
Street Nam	ne:			
City:		_State:	Zip:	
Phone Number:Email /		_Email Address		
Web Address:			(For PBA Internal Use Only)	
Publish on	PBA Membership list on Website: (Circ	le One- No is d	efault) YES	NO
Note: This optic	on is only available for Family Memberships. All informa	ation except Web Add	dress will be published. This is	s an all or nothing listing.
and can never	n make them the more chance you have of getting of be reused by anyone else. ne: 1 st Choice 2 nd choice			s are registered forever
Tattoo:	1 st choice			
	2 nd choice			
Fees: (Plac	ce an "X" next to the type of membership you	ı want)		
Family Membership (Foreign Memberships additional \$5 per yr)			One-Year Membership	
Youth Membership (Up to 18 years old; does not get to vote)			One-Year Membership	
Applicant	Birthday: MM/DD/YYYY//			
One-Tim	ne Herd Registration Fee	\$10	Forever	
	Tota	al \$	_	

Make checks payable to PBA & mail application to: PBA Registrar, 124 S. Perry St., Saint Marys, OH 45885