

MEMBERSHIP APPLICATION

I hereby make application for membership in the
ASSOCIATION OF PROFESSIONAL BALL PLAYERS OF AMERICA

New Player
 Renew _____
 ADDRESS UPDATE
Member # if known

PLEASE PRINT FULL NAME AND PERMANENT ADDRESS

NAME:			
NUMBER & STREET			
CITY		STATE	ZIP
DATE OF BIRTH	CITY	STATE	
TELEPHONE		EMAIL (PLEASE NO .EDU OR SCHOOL EMAILS)	
I WANT TO RECEIVE NOTICES VIA EMAIL:			
<input type="checkbox"/> DUES NOTICE <input type="checkbox"/> NEWSLETTER <input type="checkbox"/> NEW OPPORTUNITY/BENEFIT			
WHAT POSITION DO YOU PLAY?			

PLEASE LIST ALL TEAMS YOU HAVE BEEN WITH INCLUDING INDEPENDENT LEAGUE TEAMS

YEAR	NAME OF TEAM	LEAGUE	AFFILIATION

YEARLY DUES MUST ACCOMPANY APPLICATION
DUES BECOME PAYABLE JAN. 1 OF EACH YEAR.
ACTIVE BALL PLAYERS PAYABLE WITH TEAM IN APRIL.

YEARLY DUES:
MAJOR LEAGUES \$150.00
SCOUTS/ADMIN. PERSONNEL \$20.00 (PLASTIC CARD \$40.00)
MINOR/INDEPENDENT LEAGUES \$20.00 (PLASTIC CARD \$40.00)
MEMBERS NO LONGER ACTIVE IN BASEBALL \$20.00 (PLASTIC CARD \$40.00)



We are committed to keeping all your information confidential; we will not sell, rent or lease our mailing lists to third parties, and we will not provide your personal information to any third party individuals or companies without your permission.