



# Alberta 5 Pin Bowlers' Association

432 - 14 Street South - LETHBRIDGE, AB T1J 2X7  
Telephone: (403) 320-BOWL \* TOLL FREE: 1-800-762-3075 \* Fax: (403) 320-2676  
E-Mail: [a5pba@telus.net](mailto:a5pba@telus.net) \* Website: [www.alberta5pin.com](http://www.alberta5pin.com)



## MEMBERSHIP REGISTRATION - 2019-2020 SEASON

Bowling Centre: \_\_\_\_\_ Membership # : \_\_\_\_\_

PLEASE Check one  **NEW** Registration  *Change Info*  **RENEWAL**  **TRANSFER**  
Date of Last Membership \_\_\_\_\_ From: \_\_\_\_\_

**NAME:** \_\_\_\_\_  
*Please Print* (First Name) (Middle Initial(s)) (Surname)  
 Male  
 Female  
 Gender Variant  
Please Circle

**ADDRESS:** Street or PO Box: \_\_\_\_\_  
City / Town: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
**PHONE:** Preferred: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ *Cell Home Work*  
Alternate: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ *Cell Home Work*  
**E-MAIL:** \_\_\_\_\_

Membership Card Type	Birth Year	COST
<b>ADULT</b> <input type="checkbox"/> (Ages 22-54)	_____	(\$15.00) <input type="checkbox"/>
<b>GOLDEN AGE</b> <input type="checkbox"/> (Ages 55+ as of December 31st)	_____	(\$8.00) <input type="checkbox"/>
<b>YOUTH</b> <input type="checkbox"/> (Ages 0-21 as of December 31st)	_____	(\$8.00) <input type="checkbox"/>
<b>REPLACEMENT</b> <input type="checkbox"/> Your # is the same. Please contact the A5PBA office for cost if you require a replacement card.		

**ALL GOLDEN AGE & YOUTH MUST PROVIDE THEIR BIRTH YEAR TO RECEIVE THE DISCOUNTED FEE!**

Method of Payment: CASH / Money Order  **CHEQUE** # \_\_\_\_\_ Date of E-Transfer \_\_\_\_\_

**To make an e-transfer direct to the Alberta 5 Pin office, please contact the office.**

\*\*\* PLEASE READ & SIGN THE FOLLOWING FOR PERMISSION TO USE YOUR PERSONAL INFORMATION

By signing below, I **GRANT PERMISSION** to any of the affiliated Local, Provincial & National 5 Pin Bowling Associations, the irrevocable right to collect, use and disclose, at their discretion any information about me and my participation in any event (not limited to information contained in this registration package) for publicity, advertising or other promotion of any event or for the purpose of acknowledging or publicizing my achievement at any event. I understand that this may include written, pictorial or video materials.  
 **PERMISSION REVOKED**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature if under 18 years old \_\_\_\_\_

**A5 OFFICE USE:** Rec'd \_\_\_\_\_ Inv # \_\_\_\_\_ MR \_\_\_\_\_ DB \_\_\_\_\_ Distr. \_\_\_\_\_

**RETURN ABOVE PORTION WITH PAYMENT - RETAIN RECEIPT BELOW FOR YOUR RECORDS**

Received from \_\_\_\_\_ \$ \_\_\_\_\_

In payment of A5PBA Membership Card in Alberta for the 2019-2020 season.

A5PBA Card # \_\_\_\_\_ OR  **NEW CARD**

CENTRE REP: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Signature)



**Please retain receipt until you receive your New Card or 2019-2020 Annual Card.**