☐ NEW ☐ RENEWAL ID#_____

Membership Application

Licensee ID# **North Coast TAP #35**
Licensee: Jason and Tiffany Drahos
Recruiter: _____
Day of the Week: _____
Team Name: _____
Date of Birth: _____

PLEASE PRINT CLEARLY

First Name (as you want it to appear) Last Name

Address

City State Zip Code

Cell phone Facebook (for league info and updates)

( ) -

Email Address (for access to TAP THE APP)

Have you ever been a member of TAP? YES NO Handicap____
Have you ever been a member of another handicap League? YES NO Handicap____

TERMS: All applicants must agree to abide by the rules and regulations of TAP, Pools Amateur Tour, LLC and the league in which they participate. All Association members must exhibit courtesy and sportsmanlike conduct during all of their Association and league activities.

Annual Membership is $20.00 per year and expires one year from membership date. Membership must be renewed each year and is due on the first day of play during the month due.

Amount Paid:_____ Check ☐ Cash ☐

I acknowledge that I have read and understand the above, and agree by the terms and conditions contained herein.

Signature:_____ Date:_____