☐ NEW ☐ RENEWAL ID#_____

Membership Application

Licensee ID#	**#174**
TAP:	Chicagoland TAP
Licensee:	Jemal Elmore
Day of the Week:	
Team Name:	
Date of Birth:	

PLEASE PRINT CLEARLY

First Name Last Name Suffix

Address

City State Zip Code

Home Phone: (Include Area Code) Cell Phone: (Include Area Code)

( ) - ( ) -

Email Address and / or FACEBOOK

Have you ever been a member of TAP? YES NO (Please circle one)

Have you ever been a member of another handicap League? YES NO (Please circle one)

Are you interested in league apparel? YES NO Shirt Size: S M L XL XXL

Do you own your own cue? YES NO What Brands?_____

Check Desired League Format

Mixed Team 8-Ball	Mixed Team 9-Ball	
Bar Box ☐	Bar Box ☐	Tournaments ☐
Nine Foot ☐	Nine Foot ☐	Singles ☐

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.

BENEFITS: TAP, LLC. provides their members with score sheets, team statistics, individual statistics, and rosters of the teams in their division. The Association will also provide the opportunity for divisional playoffs, "Titleholders" trophies, and cash prizes. As an Association member you may be entitled to discounts from local area businesses and billiard establishments. Discounts and prizes are subject to change and may vary across the United States.

Annual Membership is $20.00 Expires One Year From Date.

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:**_____