

UPA SANCTIONED EVENT ROSTER (2006)

Welcome to another UPA Sanctioned Event. Please complete the information below.

Event: _____

Team Name: _____

Team's City/State: _____

Team Spokesperson: _____

Spokesperson Email: _____

Membership Dues

Current members \$0
 Regular Membership \$40, expires 12/31/06
 College Eligible \$30, expires 12/31/06
 Youth Eligible \$20, expires 12/31/06

One Time Event Player Fees

Youth Event Fee \$5, expires at conclusion of event
 Regular Event Fee \$10, expires at conclusion of event

Make checks out to the UPA . Include player or team info in the memo of the check. NO CASH

The UPA reserves the right to collect any applicable fees applicable fees for returned checks.

PLAYER INFORMATION - Page ___ of ___ for your team.						
Fill out <i>completely</i> for each player. Use two lines per player, as in the headings.						
<i>Please type or write legibly.</i>						
a.	First Name	Last Name	Street Address	City	Amt Paid Now	
b.	SS # * or UPA ID #	Phone	Email	State/Prov/Zip	(See above dues rates)	
1a.					\$	
b.						
2a.					\$	
b.						
3a.					\$	
b.						
4a.					\$	
b.						
5a.					\$	
b.						
6a.					\$	
b.						
7a.					\$	
b.						
8a.					\$	
b.						
9a.					\$	
b.						
10a.					\$	
b.						
11a.					\$	
b.						
12a.					\$	
b.						
13a.					\$	
b.						
14a.					\$	
b.						
15a.					\$	
b.						
Checks only, please, payable to UPA. Remember your team name on the check(s).					Total Dues This Page	\$

*The UPA uses social security numbers for identification purposes only. The UPA has a strict policy against giving out social security numbers and against distributing its membership database. You may use "777" instead of the first 3 digits if you would rather not give out your full SSN.