ARIZONA DARTS LEAGUE

APPLICATION FOR INDIVIDUAL MEMBERSHIP

Name: _____
(First) (Last)

Phone: _____E-mail:_____

Team:_____Season:_____

Describe your level of play:_____

*If you are under the age of 21, specify your birth date: _____

Old ADL # _____Do you wish to retain your old ADL #? Yes____ No_____ (check one)

Dues: Individual membership dues are **$30.00** per season. If membership fee is not paid prior to end of week #1, membership dues will be **$35.00** per season. All memberships are subject to approval by the Board of Directors.

We accept cash or check payable to **Arizona Darts League.** Either pay a board member in person or give money to your captain. Or mail with this completed form to: **Arizona Darts League**

Arizona Darts League
P.O. Box 26335
Phoenix, AZ. 85068-6335

Preferably, captains should collect money from players and submit payment for entire team at captains meeting.

Do Not Write Below This Line – For League Use Only

Paid check #_____ Paid cash $: _____Total Amount Paid $_____

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