

## Club Affiliation Application

**Name of Club:** \_\_\_\_\_

**\*President:** \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**\*Vice President:** \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**\*Secretary:** \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Address & Phone #: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Treasurer:** \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**Board of Directors:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*State Grievance Committee (1 adult):**

Name: \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**\*State Directors (2 adults):**

Name: \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Name: \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**\*State Youth Advisory Committee (1 adult):**

Name: \_\_\_\_\_

ARBA #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

**\*Please note your Club Officers and State Representatives must be current members of ARBA & LRBA.**

The Charter fee for adult local club is \$10.00. The Charter fee for youth local club is \$5.00. Charter renewals are due January 1st and delinquent on March 1st. Late fee of \$10.00 applies after March 1st.

Please return this form and your check to: LRBA, Julie Young P O Box 105 Pitkin, La 70656