



Membership Application

1. Name _____
2. Address _____

3. Date of Birth _____
4. Phone # _____
5. Email _____

How did you hear about us? _____

By signing below, I agree to adhere to the rules set forth by Papertown Billiards.

- 1 guest allowed per member
- Yearly membership fee of \$1: to be paid at time of this application
- Membership card must always be kept in possession of member while on premise
- Fee of \$5 will be charged for a replacement card

Applicant signature: _____

Approved by: _____