

# BPTRA MEMBERSHIP FORM

Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Street \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

**Enter what you would like to purchase**

Amount

I WOULD LIKE TO PURCHASE A BPTRA SCOREBOOK FOR MEMBERSHIP

\$25

I WOULD LIKE PURCHASE A BPTRA HAT FOR \$20

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total

\_\_\_\_\_

**BPTRA Use Only**

Check Number \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_

Budget Category \_\_\_\_\_

Make checks payable to BPTRA LLC  
1973 S. Newark Way, Aurora CO 80014

