

## MEMBER INFORMATION

As a member of the FPUSA you will be issued a player's license recognized by the member federations of the FIPJP, which is the international governing body of the sport of pétanque, with headquarters in France. Your membership card will have your photo on it; this is required for your card to meet international standards and mandatory for international competition. At tournaments in France they collect the licenses of players and they expect to see a photo on the license. Please provide a digital photo of yourself (passport style picture—no hats, no sunglasses) in JPEG or other common digital format. Your photo will be re-used each year; you do not need to re-send it when renewing your membership.

### Signed Waivers of Liability:

All our members are required to sign a "Waiver and Release" form common in all organized sports. No membership card can be sent until your signed waiver is on file with FPUSA. The waiver form is attached as page two of this application. If you are under 18 years of age, please e-mail the Secretary for an under eighteen waiver form. The information requested below is needed for our insurance, mailing list, and in order to print a Membership Card which can be used in International Competitions. Please provide your phone number and an e-mail address if you have one. For a valid FIPJP international license your date of birth and country of citizenship are required.

Documents we need with your application:

- This page filled up and signed
- A picture id (head shot)
- The signed waiver of liability
- Check of \$25.00 payable to Francois Legrain.

Our mailing address is: Bell buckle Petanque Club 197 Edd Joyce Rd Bell Buckle, TN 37020

***Please print or type except for your signature***

Date submitted \_\_\_\_\_

**LAST NAME** \_\_\_\_\_ **FIRST NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **E-MAIL** \_\_\_\_\_

**NATIONALITY** \_\_\_\_\_ **BIRTH DATE** \_\_\_\_\_ **SEX** \_\_\_\_\_  
(COUNTRY NAME ON YOUR PASSPORT) (MM/DD/YY) (M / F)

**By signing below, I hereby apply for affiliation with the FEDERATION OF PETANQUE,USA, and if accepted will be bound by, honor and abide by the rules and regulations governing the Federation and membership therein.**

**Your Signature** \_\_\_\_\_