



North American Fastpitch Association NAFA Membership Application

Team: _____

Age _____ Division - A B (Circle One)

Manager: _____

Address: _____

City: _____ St. _____

Zip: _____

Phone: (H) _____

(W) _____

E-Mail: _____

Team Web Page: _____

\$30.00 Membership Fee Expiration Date: 12-31-09

Make check payable to NAFA and mail to:

ED Kimminau
Kansas State Director
P.O. Box 1371
Dodge City, KS 67801

Phone: 800-423-2819 (w) 620-227-2282 (H)
620-227-6462 or 620-338-5375

e-mail eppy@pld.com

Site www.nafakso.com