



North Texas Pop Warner

Membership Application

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_

ORGANIZATION NAME \_\_\_\_\_ TEAM NAME & MASCOT \_\_\_\_\_

ORGANIZATION PRESIDENT \_\_\_\_\_ ORGANIZATION/TEAM COLOR(S) \_\_\_\_\_

PRESIDENT'S MAILING ADDRESS \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

OFFICIAL "NOT FOR PROFIT" ORGANIZATION?  YES  NO (501c3 registered)

ORGANIZATION CONTACT INFORMATION:

MAILING ADDRESS: \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

PRIMARY CONTACT PERSON \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

SECONDARY CONTACT PERSON \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

Entering NTPW with how many teams? \_\_\_\_\_ (This is just an intro team count you are not obligated to maintain this number, please circle and check the box of the selection)
Flag FB/Chr/Dance \_\_\_ Tiny Mite FB/Chr/Dance \_\_\_ Mighty Mite FB/Chr/Dance \_\_\_ JPW FB/Chr/Dance \_\_\_ PW FB/Chr/Dance \_\_\_
JM FB/ChrDance \_\_\_ Midget FB/Chr/Dance \_\_\_

ORGANIZATION FIELD INFORMATION:

PRACTICE LOCATION (NAME & PHYSICAL ADDRESS) \_\_\_\_\_

HOME GAME LOCATION (NAME & PHYSICAL ADDRESS) \_\_\_\_\_

ORGANIZATION BACKGROUND INFORMATION

PREVIOUS POP WARNER INVOLVEMENT  YES  NO, IF YES, WHEN, WHERE & HOW LONG?

\*Note....If you have a issue with a former TEAM, that issue will need to be resolved.

YOUR POP WARNER STATUS:  NOTATED  GOOD STANDING

My signature below serves as a bond that the information provided in this document is to be true and accurate. I also understand that if any information provided is false the organization will be immediately dismissed from NTPW. I also acknowledge I am not entitled to any type of refund if a dismal occurs.

\_\_\_\_\_
Print name

\_\_\_\_\_
Date

\_\_\_\_\_
Signature

Approved  YES  NO President's signature \_\_\_\_\_ Date \_\_\_\_\_