



## RECOGNIZED INSTRUCTOR APPLICATION

This application must be completed in full and returned to the Professional Billiard Instructor Association accompanied by a payment of \$100.00 and a Signed Confirmation of Ability form – which will be signed once you complete the three-day instructor training course. Your dues through year-end are included in this fee.

**Please print all information.**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Phone Number to be listed on PBIA website: \_\_\_\_\_

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I certify that I have completed all of the requirements to become a PBIA recognized instructor and that I am 18 years of age or older.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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Method of Payment:  Visa  MasterCard  Check or Money Order

Credit Card Number:     Amount: **\$100** \_\_\_\_\_

Cardholder's Name (as it appears on the credit card): \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

**Please mail to:**  
**Professional Billiard Instructor Association**  
**C/O Billiard Congress of America**  
**Attn: Rob Johnson**  
**10900 West 120<sup>th</sup> Ave., Unit B7**  
**Broomfield, CO 80021**  
**303-243-5070 or rob@pbia-instructor.com**