



Official PBIA Host Location Application

Pool Room Name: _____

Contact: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Number of pool tables: _____ Hours: _____

Please complete the following short questionnaire:

Are you a member of the Billiard Congress of America? If yes, please proceed. If no, please visit contact the Billiard Congress of America for information on becoming a member.

Do you have appropriate space between tables (end to end 4ft; side to side 5 1/2 ft)? Yes or No (please circle)

Do you offer quality tables in good condition, including cloth, rack and balls? Yes or No (please circle)

Do you have good/adequate lighting over the tables? Yes or No (please circle)

Do you have sound control (Ability to limit TV and music volume in the teaching area and lecture/classroom during the session)? Yes or No (please circle)

Do you have clean restrooms? Yes or No (please circle)

Do you have suitable space for lecture/demonstration? Yes or No (please circle)

Can you provide chairs/tables for students? Yes or No (please circle)

Also, please include an external photo of your pool room and a photo of the inside of your pool room where the tables are located and the instruction would take place.

Once complete, please mail to:
Professional Billiard Instructor Association
C/O Billiard Congress of America
Attn: Rob Johnson
500 Discovery Pkwy, Suite 125
Superior, CO 80027

Tel: (303) 243-5070

We will contact you within 10 business days of receipt of this application to confirm/deny your application.