



*All American*  
AMATEUR BASEBALL ASSOCIATION

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## FRANCHISE MEMBERSHIP APPLICATION

THIS FRANCHISE MEMBERSHIP IS BEING APPLIED FOR UNDER THE  
ORGANIZATION NAME OF: \_\_\_\_\_

\_\_\_\_\_

LOCATED AT \_\_\_\_\_  
(mailing address, street, avenue, state, zip code)

PHONE NUMBER \_\_\_\_\_

NAME OF PERSON WHO WILL SERVE ABOVE ORGANIZATION ON THE  
AAABA BOARD OF DIRECTORS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

NAME OF PERSON TO WHOM OFFICIAL AAABA MAILINGS SHOULD GO:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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**LIST OTHER OFFICERS OF YOUR ORGANIZATION:**

*Name*

*Address*

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**NAME OF LEAGUE IF DIFFERENT FROM ORGANIZATION NAME:**

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**INITIATION FEE \$100.00 ENCLOSED YES OR NO:** \_\_\_\_\_

**MEMBERSHIP DUES \$200.00 ENCLOSED YES OR NO:** \_\_\_\_\_

**FRANCHISE FEE \$175.00 ENCLOSED YES OR NO:** \_\_\_\_\_

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

\_\_\_\_\_  
*Date*

**DO YOU UNDERSTAND A NEW FRANCHISE MUST PARTICIPATE IN A REGIONAL TOURNAMENT IN ITS FIRST YEAR IN THE ORGANIZATION?**

**DO YOU THOROUGHLY UNDERSTAND ALL AAABA RULES AND REGULATIONS AND WOULD YOU TAKE PROPER STEPS TO FAMILIARIZE YOUR MANAGERS AND OTHER KEY LEADERS WITH THE AAABA RULES? ( Copies of the AAABA Constitution and Tournament Rules will be furnished)**

**WILL YOU MAKE EVERY EFFORT TO HAVE YOUR ORGANIZATION REPRESENTED AT EACH ANNUAL MEETING OF THE AAABA BOARD OF DIRECTORS, WHICH IS HELD THE FIRST SUNDAY IN MARCH EACH YEAR?**

*(New members must attend their first year application is voted on)*

**PLEASE ANSWER ALL QUESTIONS AND EMAIL TO FRANCHISE CHAIRMAN JOHN AUSTIN AT [aaabaprez@atlanticbb.net](mailto:aaabaprez@atlanticbb.net) or MAIL TO:**

*John H. Austin, Jr.  
AAABA Franchise Chairman  
607 East 25<sup>th</sup> Avenue  
Altoona, PA 16601*