



AMERICAN VAULTING ASSOCIATION

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NON-MEMBER FORM

USE ONE FORM FOR EACH NON-MEMBER COMPETITOR

(Non-Member Fee may be applied to full membership dues during current fiscal year)

FEE: \$25

Vaultler Coach Longeur Member of: _____
AVA Recognized Club

Name: _____ Date of Birth: _____ USA Citizen Y/N

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

To be completed by Competition Management

Competition Name: _____

Competition Date: _____

Cash Check # _____

Credit Card # _____

Exp Date: _____ Security Code: _____

CC Billing Address, City: _____ Billing Zip: _____

Signature of Competition Manager: _____

Make 2 copies: give one copy to the Competitor and send one copy to the Competition Secretary along with the \$25 Non-Member fee. You must include this form and fee along with your AVA results, and all other forms or payments (checks payable to AVA) owed to the AVA Competition Secretary ***within 10 days after the Competition.***

MAIL TO: AVA National Office, 1443 E Washington Blvd #289, Pasadena, CA 91104