

## UNITED PULLERS OF THE CAROLINAS MEMBERSHIP APPLICATION 2015

<u>PLEASE PRINT</u> (In order to make sure you receive all newsletters & information PLEASE print legibly)

| NAME   |   |                            |   |                           |  |
|--|---|----------------------------|---|---------------------------|--|
| Address  |   |                            |   |                           |  |
| City   |   | State                      | Zip Code                                  | 3                         |  |
| DOB  | PULLER  | /WORKER SS                 | SN  |                           |  |
| Phone: Home  | ome   |                            | Cell/Work                                 |                           |  |
| (IMPORTANT) E-N  | /ail Address  |                            |   |                           |  |
| ***  |   |                            | ***                                       | ***                       |  |
| Puller   | _ Vehicle N   | Vehicle Name               |   |                           |  |
| Class  | NTPA Nu   | mber                       | Motor                                     |                           |  |
| Crew Person  | Vehicle N   | lame                       |   |                           |  |
| Vehicle Owne   | r Signature   |                            |   |                           |  |
| Track Worker   | Job you a   | are willing to w           | ork                                       |                           |  |
| PLEASE READ THE  | FOLLOWING IN  | NFORMATION                 | N CAREFULL                                | Y:                        |  |
| ***ANY COMPETIT<br>DECISION OF ANY<br>OPERATOR, OR TH<br>THAT CLASS. <b>(SEI</b> | OFFICIAL BY T.<br>E PROMOTER, I                                       | ALKING TO T<br>S SUBJECT T | THE OFFICIA                               | L, SLED                   |  |
| ***ADDITIONAL G<br>AND/OR EXPULSIC   |   | -                          |   | S, SUSPENSIONS,           |  |
|  | ANLIKE COND<br>AL TO PULLING  |                            | PER LANGUA                                | GE OR CONDUCT             |  |
| PROMULGAT  | TION CONSIDERE<br>OF THE NTPA RU<br>TED BY THIS GRO<br>DISQUALIFIED D | ULE BOOK OR<br>OUP NOW, OR | ANY RULE O<br>IN THE FUTU<br>PETITION FOR | R REGULATION<br>JRE. IF A |  |

PRIOR TO THE START OF A PULL, HE OR SHE CANNOT BE RE-INSTATED. (SEE NTPA RULE BOOK)

- c) THE DECISION FOR PUNISHMENT IN ANY MANNER AS DETAILED IN A and B ABOVE SHALL BE AT THE SOLE DISCRETION OF THE BOARD OF DIRECTORS. BY EXECUTING THIS AGREEMENT, YOU AGREE THAT THE BOARD'S DECISION, IN ITS SOLE DISCRETION, FOR PUNISHMENT, FINES, EXPULSION, DISQUALIFICATION, OR SUSPENSION, IS IN THE BOARD'S SOLE DISCRETION AND SHALL BE BINDING ON THE UNDERSIGNED.
- d) THE BOARD HAS THE RIGHT, IN ITS SOLE DISCRETION, TO TERMINATE THIS APPLICATION FOR ANY CAUSE IT DEEMS APPROPRIATE BY NOTIFYING THE UNDERSIGNED OF THIS TERMINATION AND RETURNING THE \$50.00 MEMBERSHIP FEE. UPON THIS TERMINATION, THE UNDERSIGNED HAS NO RIGHTS AS A MEMBER OR OTHERWISE OTHER THAN THOSE APPEAL RIGHTS CONTAINED IN THE BYLAWS, SAME BEING INCORPORATED HEREIN BY REFERENCE. ANY DISPUTE BETWEEN THE PARTIES IN ANY MANNER SHALL BE IN THE SUPERIOR COURT OF GUILFORD COUNTY, NORTH CAROLINA, AND ALL PARTIES AGREE TO WAIVE JURY TRIAL.

\*\*\*NO ONE WILL BE ABLE TO REGISTER FOR A CLASS WITHOUT SHOWING THEIR CURRENT NTPA COMPETITION LICENSE CARD OR COMPLETING A PAY PER HOOK FORM AT THE ENTRY TABLE.

\*\*\*YOU MUST BE A MEMBER OF UPOC AND PULL AT LEAST 60% OF THE HOOKS, AFTER JOINING UPOC, TO BE ELIGIBLE FOR END OF THE YEAR POINTS MONEY.

\*\*\*MEMBERSHIP FEE IS \$50.00 IF POSTMARKED BEFORE FEBRUARY 15<sup>TH</sup>. POSTMARKED AFTER FEBRUARY 15<sup>TH</sup>, \$65.00. POSTMARKED AFTER MARCH 31<sup>TH</sup>, \$75.00 PER APPLICANT.

\*\*\*YOU MUST BE A MEMBER OF UPOC BY SEPT 30, 2015 TO BE ELIGIBLE FOR THE \$75 PAYOUT WHEN PLACING OUT OF THE MONEY AT AN EVENT.

## I HAVE READ AND AGREE WITH ALL RULES LISTED AND AGREE TO CONTENTS OF THIS APPLICATION. I ALSO UNDERSTAND THAT IT IS MY RESPONSIBILITY TO KNOW AND FOLLOW ALL NTPA AND UPOC RULES AND REGULATIONS.

APPLICANT SIGNATURE \_\_\_\_\_\_ DATE:

MAIL completed & signed Membership Application along with check to: UPOC
Attn: Cheryl Jo Tyndall, Secretary/Treasurer
1154 Still Meadow Drive
Creedmoor, NC 27522

Questions: H: 919-529-0608 C: 919-641-3870 or e-mail cjm060275@yahoo.com

| APPROVED | President          |
|----------|--------------------|
| APPROVED | Head Tech Official |
| APPROVED | Secretary          |
| DATE     |                    |