



BILLIARD CONGRESS
OF AMERICA

Billiard Congress of America 2008 Membership Study Order Form

Ship To: Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ E-mail: _____

Order Details:

DESCRIPTION	QTY.	UNIT PRICE	TOTAL
Membership Study - Pool Room Operators		\$250.00	\$
Membership Study - Billiard Retailers		\$250.00	\$
		Sub Total	\$
		CO Sales Tax - 7.4%	\$
		Shipping & Handling	\$10.00
		TOTAL	\$

Payment Method: Check Visa Master Card American Express

Total Amount: \$ _____

Credit Card Number: _____ Exp. Date: _____

Cardholder Name: _____

Please mail, fax or e-mail this order form to:

Billiard Congress of America
 Attn: Kari Freeland, BCA Membership Coordinator
 3525 Piedmont Road, Building Five, Suite 300
 Atlanta, GA 30305
 Phone: 866.852.0999
 Fax: 404.240.0998
 E-mail: kari@bca-pool.com