



Membership Application

APFL MISSION STATEMENT:

Providing fast paced, action packed, family entertainment in your community's local arena, at an affordable price.

Please email the completed application and all requested information to the Arena Professional Football League, LLC, Attn: Liz Benavides, Lizbenavidespr@arenapfl.com.

Please wire the \$1,000 Application Fee* to [instructions below] (instructions below). *Please note that the Application Fee is NON-REFUNDABLE, and that the application must be submitted in full for consideration.

Wiring Instructions:

Wiring Information as follows: Account Number : 400054232445
ABA Routing Number: 253177832
Banking Address: 3200 Truliant Way, Winston Salem, NC 27103

Arena Professional Football League Financial Information for 2022 Season

League Franchise Fee

\$5,000 per year* to cover APFL league costs and expenses

**Subject to a yearly review by the APFL Board*

Additional Items Required for Application approval:

- Credit check/background check authorization (see page 4 of this Application)
- APFL-approved arena (holding a minimum of 2,000 spectators)
- APFL-approved playing surface
- APFL-approved team logo and uniform design
- APFL-approved team operating budget
- Willingness to travel to out-of-state locations pursuant to APFL schedule

Requirements of Applicant once Application is approved:

- Execute APFL Membership Agreement (2-year commitment)
- Execute acknowledgement of APFL 2022 Rules (including commitment to a 10-game regular season)

Traveling Teams:

Application fee is \$1,000. Franchise fee is \$2,000.

Ownership Information

Applicant Name (Corp, LLC, Partnership or Individual): _____

Applicant's State of Incorporation/Formation: _____

Applicant's President or Lead Contact (if applicable): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Team Website: _____

****If Applicant has multiple owners/members, please submit the names and addresses of each owner/member with this Application.***

ARENA INFORMATION

Arena Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Arena Capacity: _____

Arena Owned or Leased*: _____

****If leased, please provide a copy of the lease with this Application***

Authorization and Release for Background Screening

**All owners/members of Applicant must sign this form*

The Applicant(s) below hereby consent that the Arena Professional Football League (“**APFL**”) or its permitted agent(s) is authorized to order credit reports, criminal background checks and any other reasonable screening reports from third party providers regarding myself and the team Applicant that may relate to our likelihood to make regular and timely League Fee payments.

X: _____

X: _____

Name: _____

Name: _____

Date: _____

Date: _____

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