

Cambridge Area Pickleball Association, Inc

2026 Membership Application

Name _____ Cell Phone _____

Address _____ Use my info from last year

(check if applicable)

E-Mail _____

() \$20 per year payable to CAPA _____ First time member \$10 (check)

Mail to: CAPA

PO Box 86

Cambridge, MN 55008

Or: give to Board members: Tracy Allen, Mike Mueller, Mary Person, Mary Kay Thomas, Lauri Jorgenson, Nancy king, Terry Shattuck or turn in at scheduled pickleball at the Armory

Contact us at: cambridgepickleball@gmail.com Visit us www.cambridgepickleball.com

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