



ART KRUGER'S NATIONAL DEAF BASKETBALL ORGANIZATION

2022 Regional Affiliation Form

(Please PRINT the names of the officers at your regional)

Regional's Name: _____

Treasurer's Name: _____

Treasurer's Email Address: _____

Secretary's Name: _____

Secretary's Email Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Please follow the instructions:

- 1) Complete the Regional Affiliation Form.
- 2) NDBO Regional Affiliation Form Fee of 50 dollars in a check or money order. (Write to NDBO)
- 3) Mail all of them to: NDBO, PO BOX 2624 Valrico, Florida 33594

**Deadline to fill out the Regional Affiliation Form:
Anytime before or by December 31, 2021 (postmarked)**