

***Please Return A.S.A.P  
To: Chip Hanuscik  
AAHLBC Chairman  
498 Gaughan Ct.  
Archbald, Pa. 18403***

## **AAHLBC Convention Contact Information**

Completion of this form  
is critical.  
**Please Cooperate**

Please Verify Your

Booster Club Information:

Club Name:

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Club Address:

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***A new Booster Club Directory*** City:

---

***will be provided at Convention.*** State/Province:

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**PLEASE RETURN!!!**

Zip/Postal Code:

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Country:

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Website:

---

Team Phone No. and Group Ticket Contact:

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Booster Club

Convention Contact:

Name:

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Address:

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***Place an "X" next to any***

City:

---

***information you would not***

State/Province:

---

***like printed in the directory***

Zip/Postal Code:

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Country:

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Phone No. & E-mail

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