



Club Deportivo San Carlos A.C.

Application for Membership

PLEASE PRINT

Date (Fecha) _____

Name (Nombre) _____

Phone Number (Número de teléfono) _____

Email (Correo electrónico) _____

Spouse's Name (Nombre de Esposa/ Esposo) _____

Phone Number (Número de teléfono) _____

Email (Correo electrónico) _____

Mexico Address (Dirección en Mexico)

United States or Canadian Address

United States or Canadian Phone (s) _____

Do you have any volunteer time to give to the Club? Yes ____ No ____

In what area would you be interested in volunteering? _____

Lifetime Membership: One Hundred Dollars
Or Equivalent in Pesos

Apdo 85, San Carlos, Sonora, MX 85506