SDES DE ALVARADO



SDES Alvardo

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MEMBERSHIP APPLICATION

Member Number:\_\_\_\_\_

Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name (s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sponsored by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_

Date Dues Paid:\_\_\_\_\_\_\_\_ Amount:\_\_\_\_\_\_\_\_ Paid to:\_\_\_\_\_\_\_\_\_\_