



CADILLAC & LaSALLE CLUB YOUTH CLUB

MEMBERSHIP APPLICATION

NAME _____

ADDRESS _____

CITY, STATE, ZIP/CITY, PROV., POSTAL CODE/CITY, COUNTRY,
POSTAL CODE

PHONE _____

BIRTHDAY _____

TEE SHIRT SIZE _____

CLC PARENT/GRANDPARENT _____

PARENT/GRANDPARENT CLC NO. _____

Dues are \$5.00 per year due on the anniversary of joining. Please send your application and \$5.00 US check or money order to:

Gerald Terranova
CLC Youth Program Chairman
3162 Waterside Dr.
Arlington, TX 76012