



Complete this form and mail it to the address below. Please print clearly and complete all the information.

PARENT INFORMATION:

Last Name: _____ First Name(s): _____

Address: _____

Zip Code: _____ Home Phone: _____

Mother's Email: _____

Mother's Work: _____ Mother's Cell: _____

Father's Email: _____

Father's Work: _____ Father's Cell: _____

STUDENT INFORMATION:

Last Name	First Name	M/F	Grade	Sport(s)

MEMBERSHIP TYPE:

- Corporate \$ 350
 - Elite \$ 200
 - Charger \$ 100
 - Black \$ 50
 - Red \$ 25
- How you would like your name to appear in the CSA Program (if submitted before July 30): _____

METHOD OF PAYMENT:

Amount \$ _____

Cash

OR

Check # _____ (payable to CSA)

OR

Credit Card: Visa MasterCard American Express Discover

Card Number _____ Exp Date _____ Security Code _____

Name on Card _____ Signature _____

*****You may join CSA at anytime throughout the year!*****

****All Memberships received before July 30, 2018 will be listed in the 2018-2019 Charger All Sports Program****

RETURN COMPLETED APPLICATION AND PAYMENT TO:

Charger Sports Association. c/o Allison and Roger Espinosa. 14881 Cadillac Dr. 78248. (210)710-5160