

APPLICATION FOR MEMBERSHIP

Date _____

Name (s): (1) _____ (2) _____

Address: _____

Telephone: Home: _____ Office: (1) _____ (2) _____
FAX: _____ E-Mail (1) _____ (2) _____

Annual Dues:

| | | | | |
|---|-----------|------------------------------------|----------|----------|
| Individuals | .\$55.00 | Non-resident Individuals | .\$55.00 | |
| Couples | \$65.00 | Non-resident Couples | .\$55.00 | |
| Students (under 25 years old) | | | | .\$30.00 |
| International Postal Surcharge in addition to Dues (International Money Order or check drawn on a United States bank, please) : | | | | |
| \$25.00 - Mexico and Canada | | \$40.00 - Everywhere else | | |
| Amount submitted with application | \$ _____. | | | |

Summary of Afición
(Optional)

How did you first become interested in bullfighting, and when did you attend your first bullfight?
Have you attended corridas in Spain? Mexico? Other?

| | |
|---------------------|--------------------|
| Applicant #1. _____ | Applicant #2 _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

**POST OFFICE BOX 2691
HOLLYWOOD, CALIFORNIA 90028**

