



California Side-by-Side Society, Inc.



Membership Application Form

Name: _____

Spouse: _____

Address: _____

Street or P.O. Box

City

State

Zip

Telephone: _____

Email: _____

Please check the appropriate chapter where you wish to be a member. Make check payable to: CA SIDE BY SIDE SOCIETY. Mail your completed application and check for \$60 to the address of the chapter you have selected. Your annual membership fee includes your spouse and entitles you to participate in all events regardless of which chapter is sponsoring the particular event.

Greater San Francisco Bay Area Chapter

Roger Stuart, Chairperson
1925 Union Street
Alameda, CA 94501
Tel: 510.522.2910
Fax: 510.522.3798
Email: roger@listo.com

Greater Central Valley Area Chapter

Larry Shelton, Chairperson
P.O. Box 188
Folsom, CA 95763
Tel: 916.933.4347
Fax: 916.941.1376
Email: lsheltonxs@sbcglobal.net

Greater Los Angeles Basin Chapter

Jerry Kitto (Ivory Beads)
672 Shoppers Lane
Covina, CA 92723
Tel: 626.915.4022
Fax: 626.915.2771
Email: info@ivorybeads.com

FOR CHAPTER USE ONLY

1. Chapter _____
2. Application Date Received _____
3. Membership Fee Paid **\$ 60.00**
4. Date Paid _____

Chapter to send copy of above to state office when items #1 to #4 are completed. Chapter will keep copy for member file.