



LOS GÜEROS M/C INTL. ASSOCIATE MEMBER (NON-RIDER) APPLICATION FORM

Name: _____ Nickname: _____

Mex. Address: _____

US/Can Address: _____

Cell Phone: _____ Email: _____

Are you or have you been a member of another motorcycle club? Yes No

If yes, name of the club(s) _____

Have a facebook account and if so, what name? No Yes _____

I have read, understand, and agree to abide by the Club By-laws Yes

Emergency contact: _____
Must be someone that will not be a passenger riding with you on your motorcycle.

Full Member Sponsor: _____

Singature: _____ Date (YY/MM/DD): ____ / ____ / ____

*Annual Fee: \$500 payable April 1st each year or prorated \$50 per month if joining between July 1st and March 31st. Prices in Pesos.

THERE IS A MINIMUM 90 DAY PROBATION PERIOD BEFORE MEMBERSHIP IS GRANTED. IF MEMBERSHIP IS NOT GRANTED MONIES PAID WILL BE REFUNDED. PLEASE INCLUDE A COMPLETED COPY OF THE EMERGENCY CONTACT FORM WITH YOUR MEMBERSHIP APPLICATION.