

## SPANISH AMERICAN CLUB OF THE VILLAGES

Spanishclubtv.com

### Membership Application or Renewal Form

\_\_\_\_\_ New Member                      \_\_\_\_\_ Renewal                      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Ancestry Origin: \_\_\_\_\_

Cellular number: \_\_\_\_\_ Resident ID Number: \_\_\_\_\_

Email:

@																	

Name: \_\_\_\_\_ Ancestry Origin: \_\_\_\_\_

Cellular number: \_\_\_\_\_ Resident ID Number: \_\_\_\_\_

Email:

@																	

Address: \_\_\_\_\_

City: \_\_\_\_\_, FL                      Zip Code: \_\_\_\_\_

***Eligibility for membership in this Club requires that applicants reside in The Villages.***

Please attach a \$25.00 annual membership fee per person. Mail this form with the check payable to Spanish American Club.

Manuel R. del Valle                      Tel. 305-778-8608

8190 SE 174th Lapham Ln.

The Villages, FL 32162

[Manuelpr144@gmail.com](mailto:Manuelpr144@gmail.com)

**Reminder, please add the club email to your contacts: [villagesspanishamericanclub@gmail.com](mailto:villagesspanishamericanclub@gmail.com)**

Sponsor name for new members: \_\_\_\_\_

Signature of applicant or member: \_\_\_\_\_

Signature of applicant or member: \_\_\_\_\_

(Print name and signature)

Rev. 11/01/24