

LAS CANDALISTAS DUES FORM

Name: _____

_____ Active \$55.00

_____ Associate \$75.00

_____ Sustainer \$100.00

_____ I am an Active or Associate and am paying my \$20.00 Supply Fee now (on same check)

Total Amount: _____

Make check payable to Las Candalistas and send to Lisa Nesicolaci, 24288 Ward St., Torrance, CA 90505 or you can pay with Venmo @Lisa-Nesicolaci. Please submit before June 30th to be included in our printed Membership Roster.

_____ Check here if there are ANY changes to your information and ONLY fill in if you have CHANGES.

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Spouse's Name: _____

THANK YOU FOR YOUR PAYMENT