



*REGULADORES*  
*Law Enforcement Motorcycle Club*  
*Corpus Christi Founding Chapter*

P.O. Box 175  
Corpus Christi, Texas 78403

*ASSOCIATE MEMBERSHIP APPLICATION*

*Name* \_\_\_\_\_

*Address* \_\_\_\_\_

*City* \_\_\_\_\_ *State* \_\_\_\_\_ *Zip* \_\_\_\_\_

*Telephone -*  
*Home* \_\_\_\_\_ *Cell* \_\_\_\_\_ *Work* \_\_\_\_\_

*Email Address* \_\_\_\_\_

*Sponsors Name* \_\_\_\_\_

*Please include a xerox copy of the following with application:*

\_\_\_\_\_ *Divers License*

\_\_\_\_\_ *Motorcycle Registration*

*Signature of Associate Member* \_\_\_\_\_

*Signature of Sponsor* \_\_\_\_\_

*Date* \_\_\_\_\_

*Visit our website at [www.reguladorescc.com](http://www.reguladorescc.com)*