



Carlsbad Sister City Ambassadors

CSCA Membership Enrollment Form

I wish to become a member of the Carlsbad Sister City Ambassadors as indicated below. I realize that all donations are tax deductible. Please send me a membership confirmation at the address shown below.

(Check here if you would rather receive an e-mail confirmation.)

Name(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ E-Mail: _____

- Student Ambassador (\$10 Suggested Donation)
- Citizen Ambassador (\$25 Suggested Donation)
- Business Ambassador (\$100 Suggested Donation)
- Endowment Ambassador (\$500+ Suggested Donation)

Please make checks to: Carlsbad Sister City Ambassadors
and mail to us at P.O. Box 131202, Carlsbad CA 92013

Thank you for joining us! We look forward to including you in our international cultural enjoyment.