



ChivasPop



ChivasPop Official Store Application

Name: _____ Social Security #: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone: _____

E-mail: _____

Commercial References

1. _____
2. _____
3. _____

Financial Reference

1. _____
- Occupation: _____

Explain briefly why are you interested in opening an official ChivasPop store

Please mail/fax this application to:

Club Deportivo Chivas USA
18400 Avalon Blvd. Ste. 500
Carson, CA 90746

Fax: 310-630-4551
Attn: Antonio Blanchet, Vice President of Marketing

For more information please call 310-630-4551 x3602