

# PEARL HARBOR HAWAIIAN CIVIC CLUB

E PAEPAE I LUNA LOA I KA MALAMALAMA

“Hold High the Light of Knowledge”

Chartered: April 16, 1964

## ASSOCIATION FOR MEMBERSHIP APPLICATION

LAST NAME:			FIRST NAME:			MIDDLE:		
HOME ADDRESS:								
MAILING ADDRESS:								
HOME PH:			WORK PH:			EMAIL:		
DATE OF BIRTH:			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			ARE YOU OF HAWAIIAN ANCESTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO		
OCCUPATION:						EMPLOYER:		
# of Children:	# _____	FEMALE	AGES/NAME(s):					
	# _____	MALE	AGES/NAME(s):					

## MEMBERSHIP INFORMATION

Type of Membership:

**REGULAR:** Any adult person of Hawaiian Ancestry is eligible for regular membership.

**ASSOCIATE:** Any adult person who cannot qualify by reason of ancestry is eligible, provided that such person is the spouse of a Regular member or has been involved with a Hawaiian Civic Club for 5-years.

**OPIO:** Any youth of Hawaiian Ancestry, thirteen (13) through seventeen (17) year of age

Please indicate NAME of Regular Member:

**Initiation Fee:**  \$1.00    **Annual Dues:** \$25.00    **Opio:** \$12.50    **Notes:**

Name of another Hawaiian Civic Club(s) that you are presently a member with:

## DO NOT WRITE BELOW THIS LINE

### Membership Committee

Date Received:

ACCEPTED     REJECTED

Signature/Date of Chairperson:

### Board of Directors

Date Received:

APPROVED     DISAPPROVED

Signature/Date of Officer:

Treasurer/Print Name:

Correspondent Secretary/Print Name:

Member Chair/Print Name:

Member Applicant / Date Initiated:

**Paid by:**  CASH     CHECK # \_\_\_\_\_

**Amount:** \$ \_\_\_\_\_    **Date Rec'd:** \_\_\_\_\_

**Rec'd by:** \_\_\_\_\_

**MAILING ADDRESS: PEARL HARBOR HAWAIIAN CIVIC CLUB, P.O. BOX 66, AIEA, HI 96701**