

Friends of the Royal Hawaiian Band Membership Form

Please fill in this form completely and legibly, then mail it with your check to the address indicated on the bottom of this form. Mahalo for your interest and support.

Contact Information			
Last Name	First Name	Middle Initial	Title: Mr., Mrs., Dr., etc.
Mailing Address	City	State or Country	Zip Code
E-Mail Would you like your newsletter e-mailed? Yes ___ No ___	Telephone(s)		
Membership (✓ one)		Type of Membership (✓ one)	
Renewal ___ New Member ___	Member \$30 ___ Sponsor \$100 ___ Student \$10 ___		
E-Mail Address:	Patron \$500 ___ Benefactor \$1000 + ___		
Please write your check to the Friends of the Royal Hawaiian Band and mail to: <div style="text-align: center; margin-top: 10px;"> The Friends of the Royal Hawaiian Band P.O. Box 1894 Honolulu, HI 96805-1894 </div>		Date remitted _____ Total remitted \$ _____ Dues \$ _____ Donation \$ _____	