

Japanese Cultural Center of Hawai'i Membership Form

- \$15 Student (with valid student ID)
- \$20 Senior (70 yrs +) / Military (circle one)
- \$35 Individual
- \$50 Family (2 adults & up to 2 children 17 & under)
- \$100 Sustaining Individual
- \$250 Sustaining Family (2 adults, 2 children 17 & under)
- \$1,000 Legacy (Lifetime, Individual)

(Membership is valid for one year and is non-transferable)

FOR FAMILY MEMBERSHIPS ONLY:

Name of second adult: _____ M / F

Children age 17 and under

Name of child: _____ M / F

Name of child: _____ M / F

In **addition** to my membership, enclosed is my tax-deductible contribution of \$ _____ in support of JCCH educational programs & activities.

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Please send payment to MAILCODE 61319, PO BOX 1300,
HONOLULU, HI 96807-1300 or 2454 S BERETANIA ST,
HONOLULU, HI 96826-1524.

- Check enclosed, payable to **JCCH**
- Charge to my VISA MasterCard

Credit Card # _____ Exp. _____

Signature _____