

KALIHI BUSINESS ASSOCIATION
MEMBERSHIP RENEWAL APPLICATION

Renew your membership to the Kalihi Business Association. Annual dues are \$50.00. We ask you to encourage your fellow co-workers or other business associates to join the KBA. Have your voice be heard in the community.

If you have already renewed, provide this form to a friend or business associate so that they can become a member of KBA too!

Company Name _____

Full Name _____

Mailing Address _____

Office Phone _____ Fax _____

Email Address _____

Business Type (as classified in the Yellow Pages) _____

Membership Dues \$ 50.00

Advertise in the Membership Directory
(Check all that apply below)

Full page size \$100.00

Business Card size \$ 50.00

I would also like to donate
to the Kalihi Business Association \$ _____

Total Amount Enclosed: \$ _____

Checks payable to: **Kalihi Business Association**
Mailing address: P.O. Box 17729, Honolulu, HI 96817

Signature _____ Date _____

THANK YOU!