



HONOKA`A BUSINESS ASSOCIATION

Preserve the Past, Honor the Present, Shape the Future

P.O. Box 474 Honoka`a, Hawai'i 96727

MEMBERSHIP APPLICATION

Annual Dues: \$85.00 Please print, fill out and make your check payable to Honoka'a Business Association, Attn: Membership Committee, PO Box 474, Honoka'a, HI 96727

You will be invited to attend a Board meeting and upon acceptance, receive an HBA Welcome Letter

APPLICANT INFORMATION (Please print clearly)

Company Name: _____

Your Name: _____

Current Mailing Address: _____

Phone: _____ E-mail: _____ Fax: _____

Mobile phone: _____ GET# _____

Preferred method of contact: Phone Fax E-mail USPS

Are you the owner? Y / N Representative to business: _____

Tell us about your business: How long have you been in business? _____

What is your motto? _____

Are you interested in serving the community by joining a committee? Please check all that interest you.

- Governance & Bylaws Membership Budget Fundraising
- Hospitality Western Week First Friday Other _____
- Planning Communication Scholarship

Please print full name: _____

Signature of applicant: _____

FOR HBA BOARD USE ONLY

Date Received: _____ Board Approved: Y / N Date Approved: _____

Dues Paid: _____ Signature of BOD: _____

Entered: _____ Membership letter sent (date): _____