

MEMBERSHIP APPLICATION

**PLEASE PRINT AND SEND COMPLETED FORM & CHECK TO:
Filipino American National Historical Society- Hawaii State Chapter**

**(FANHS-HSC)
P.O. Box 240274, Hon., HI, 96824-0274**

1.Name (First, Last) If you are applying for a Family Membership Category, please list names of family members living at home. Please continue your list below, if necessary.

2. Mailing Address, City, State, Zip Code

3. Tel.#: Business/Cell/Mobile

4. Email Address

MEMBERSHIP FEES (Please check)

**** ANNUAL MEMBERSHIP:**

- Senior (62+).....\$10.00
- Student.....\$10.00
- Individual.....\$30.00
- Family.....\$45.00

**** TEN-YEAR MEMBERSHIP:**

- Individual.....\$150.00
- Family.....\$250.00

**** LIFETIME MEMBERSHIP:**

- Individual.....\$300.00
- Family.....\$350.00

DONATIONS:

** I would like to make a donation to support FANHS-Hawaii State Chapter.

AMOUNT: \$ _____

** I wish to donate funds in memory of:

_____ Name

AMOUNT: \$ _____

**Total amount of check enclosed:

AMOUNT: \$ _____

Please make check/s PAYABLE TO:
FANHS-HAWAII STATE CHAPTER

SHARING INTERESTS & TALENTS

Please check personal interests and talents you are willing to share with FANHS Hawaii State Chapter:

- Archival/Record Collection
- Photo Collection
- Writing/Newsletter
- Oral/Written History
- Videography
- Research
- Lectures
- Assist with 2020 Conference
- Other _____

Please Email Questions to:

FANHS.HawaiiState@gmail.com