



Hawaii Baptist Academy Alumni Association

# Membership Application

Please complete and return to the address below

## Membership Category (select one)

### Annual Membership

- Individual \$50
- Individual Package \$200  
(Buy 4 Years, Get 1 Year Free!)
- Young Alumni \$25  
(Last 5 graduating years)
- Young Alumni Package \$100  
(Buy 4 Years, Get 1 Year Free!)
- Alumni Family \$25  
(Additional Alumni graduates in the same household)
- Alumni Family Package \$100  
(Buy 4 Years, Get 1 Year Free!)

## Billing Information (select one)

- Pay by Check**  
I have enclosed a check, payable to:  
"Hawaii Baptist Academy Alumni Association"

- Pay by Credit Card**  
**Charge to:**



Name as it appears on card

Card Number

Expiration

CVC Number

Billing Address

Signature

## Personal Information (required)

Name (Ms./Mrs./Mr.)

Maiden Name if Applicable

Street Address

City

State

Zip

Home Phone

Business Phone

Email Address

Year of Graduation

Associate? Y/N

Occupation

## Alumni Family Information

(list members in household)

Name

Name

Name

Name

## Mail completed application to:

Hawaii Baptist Academy  
Office of Institutional Advancement  
Attn: Alumni Association  
2429 Pali Hwy  
Honolulu, HI 96817

**Or fax to:**  
(808) 564-0332

### I am interested in helping with:

- Serving on the Board
- Fund Raising
- Volunteering at HBA

- Membership
- Special Events
- Other \_\_\_\_\_

Donations are tax-deductible to the fullest extent of the law.