

# JOIN US TODAY!

Complete the Membership Application below

**Membership Type:**       **General (\$75)**     **Student (\$25)\***     **Corporate (\$275)\*\***

Membership is non-transferable and valid for one (1) year renewable on membership start date.

\*Student Memberships granted with proof of enrollment in an educational institution.

\*\*Corporate Memberships for 5 individuals whose names must be submitted within 30 days from membership start date are transferable only in the event of employee termination wherein the corporate entity may enlist a designee as a replacement for the remaining time of the membership.

_____	_____	_____	<input type="checkbox"/> Female	<input type="checkbox"/> Male
Last Name	First Name	Middle Initial		
_____	_____	_____	_____	_____
Address	City	State	ZIP CODE	
_____	_____	_____	_____	_____
Home Phone Number	Mobile Number	Work Phone Number	Email	

**PAYMENT INFORMATION** Choose one:

Check or money order in U.S. funds drawn on a U.S. bank, or credit card payment, must be included and payable to HAPBWA at the time of application. Dues are payable in advance and are not refundable or transferable.

Check    N° \_\_\_\_\_    Amount \$ \_\_\_\_\_

Credit card:     MasterCard     Visa     AMEX     Discover

Card No. \_\_\_\_\_    Exp \_\_\_\_\_    CVV \_\_\_\_\_

Signature/Name on Card \_\_\_\_\_

