***Hawai’i Classic Cruizers, Inc.***

**OFFICE USE ONLY**

**Date Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cash: \_\_\_\_\_\_\_\_\_\_\_\_ Check No. \_\_\_\_\_\_\_\_\_\_**

**Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Membership Card ID No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***808classiccruisers@gmail.com***

[**https://hawaiiclassiccruisers.com/**](https://hawaiiclassiccruisers.com/)

***Facebook: HI Classic Cruizers***

***50 Akala Road, Hilo, HI 96720***

**Membership Application – 2019**

Date:

**NAME:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE:** **(home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please list vehicle(s) below:**

|  |  |  |  |
| --- | --- | --- | --- |
| **YEAR** | **MAKE** | **MODEL** | **COLOR** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Auto Insurance:**

**Membership dues of $25 per person are for January 2019 – December, 2019.**

**Check payable to “Hawaii Classic Cruizers, Inc.” can be mailed to: 50 Akala Road Hilo HI 96720**

January 2, 2019