

Hawai'i Classic Cruizers, Inc.
808classiccruisers@gmail.com
<https://hawaiiclassiccruisers.com/>
Facebook: HI Classic Cruizers
16-579 Kipimana St.
Keaau, HI 96749
Membership Application – 2026

OFFICE USE ONLY

Date Paid: _____
Cash: _____ Check No. _____
Received by: _____
Membership Card ID No: _____

Date: _____

NAME: _____

E-MAIL: _____

MAILING ADDRESS:

CITY: _____ ZIP: _____

PHONE: (home) _____ (cell) _____

Preferred Method of Contact: (Check One) Phone Email Mail

Please list vehicle(s) below:

YEAR	MAKE	MODEL	COLOR

Auto Insurance: _____

Membership dues of \$30 per person are for January 2026 – December, 2026.

Check payable to “Hawaii Classic Cruizers, Inc.” can be mailed to:
16-579 Kipimana Street, Keaau, Hawaii 96749