



**9<sup>th</sup> Island Cultural Club of Las Vegas**  
*A cultural club where the "Aloha Spirit" is perpetuated through diversity*

**Membership Application**

**Application Date:** \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street: \_\_\_\_\_ City / State / Zip Code: \_\_\_\_\_

Date of Birth: (MM/DD) \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\*If Corporate Sponsorship – Company Name \_\_\_\_\_

**\*\*\*\*\*Spouse Information\*\*\*\*\***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street: \_\_\_\_\_ City / State / Zip Code: \_\_\_\_\_

Date of Birth: (MM/DD) \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Membership Type**

*All memberships are based on a Calendar Year (Jan.-Dec.)*

**Must check applicable Membership Type below, if left blank it will be considered a donation.**

	<b>\$25 Single</b> (18+ Years)
	<b>\$100 Corporate</b> (only 1 Membership Allowed)
	<b>\$50 Family</b> (2 Adults, 3 Children within same household, \$10 each additional child)
	<b>\$10 Student</b> (Enrollment in a Post-Secondary School Required)
	<b>\$10 Sr. Citizen</b> (65+ Years or Older)
	<b>*** DONATION ONLY ***</b> APFCU / OTHER _____

*Family Membership with Children (if applicable)*

Name: \_\_\_\_\_ Date of Birth: (MM/DD) \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: (MM/DD) \_\_\_\_\_ Age: \_\_\_\_\_

**Please check all preferred methods of contact for club announcements, event and meeting reminders**

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Text Messages: \_\_\_\_\_ Email: \_\_\_\_\_

Membership Application Received By: \_\_\_\_\_ Date Processed: \_\_\_\_\_