



2019 H-CLUB MEMBERSHIP APPLICATION

Name _____

Address _____

City _____ State _____ Zip _____

Phone (business) _____ (home) _____

Cell _____ Email _____

Membership Level

- | | | |
|--------------------------|-------------------|------------|
| <input type="checkbox"/> | National Champion | (\$20,000) |
| <input type="checkbox"/> | All-American | (\$10,000) |
| <input type="checkbox"/> | All-Conference | (\$4,000) |
| <input type="checkbox"/> | Captain | (\$1,750) |
| <input type="checkbox"/> | Starter | (\$800) |
| <input type="checkbox"/> | Varsity | (\$400) |
| <input type="checkbox"/> | Fan | (\$50) |
| <input type="checkbox"/> | Other | \$ _____ |

Method of Payment

Check enclosed (payable to **UH Athletics**)

Visa MasterCard Discover Amount Charged \$ _____

Account No. _____ - _____ - _____ Exp Date _____

Name on Card _____

Billing Address _____ City _____ State _____ Zip _____

Authorized Signature _____ Date _____

*Contributions to the H-Club Athletic Fund are 100% tax deductible, less the fair market value of benefits received. Please consult your tax advisor for more information.

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