



2020 H-CLUB MEMBERSHIP APPLICATION

Name _____

Address _____

City _____ State _____ Zip _____

Phone (business) _____ (home) _____

Cell _____ Email _____

Membership Level

// National Champion	(\$20,000)
// All-American	(\$10,000)
// All-Conference	(\$4,000)
// Captain	(\$2,000)
// Starter	(\$1,000)
// Varsity	(\$500)
// Fan	(\$50)
// Other	\$ _____

Method of Payment

// Check enclosed (payable to **University of Hawaii**)

// 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 tax deductible, less the fair market value of benefits received. Please consult your tax advisor for more information.

Ahahui Koa Ānuenue
1337 Lower Campus Rd.
Honolulu, HI 96822

Phone: (808) 956-6500

Fax (808) 956-4598