

MAKAWAO HONGWANJI ANNUAL MEMBERSHIP UPDATE FORM

Please complete and return this form to Makawao Hongwanji, P.O. Box 188, Makawao, HI 96768 Check

All that Apply:

- New member
- Membership renewal
- I would like to receive NEXT year's Honpa Hongwanji Calendar (pick up calendar at office in Dec.)
- Please remove my name from your **Membership List**. Name _____

Please update your family's information in the table below. We would like to keep our membership demographics as accurate and current as possible.

	Last Name	First Name	Date of Birth	Comments
Head of Household				
Spouse				
Dependent child				
Dependent child				
Dependent child				
Dependent child				

Mailing address: _____

Phone: _____ **Cell:** _____ **Email** _____

How can we improve our temple and its programs? Use the back of this sheet for your ideas.

ANNUAL MEMBERSHIP DUES -- Payment BEFORE SEPT. 7 would be appreciated
 (If you have already paid your dues for this year, please disregard this section)

The recommended annual membership dues for Makawao Hongwanji is (but not limited to) **\$300** per family.

Please make checks payable to **Makawao Hongwanji Mission**.

Payment method: In full Monthly Other _____

Amount enclosed: _____

(Please check if applicable) **EMERITUS member**--long time member who, because of age, disability, or financial hardship, is having difficulty paying annual dues. No dues required and entitled to all sustaining member benefits.

Name of emeritus member(s) _____

Contact name, relationship, phone number and/or email:

BWA (Buddhist Women's Association) Membership Dues

The annual dues for BWA members is \$25. Make separate check payable to **Makawao Hongwanji BWA**.

I am a member Not yet a member, but would like to join.

Name _____ Amount enclosed: _____