

HACAC Membership Application/Invoice 2009-10

For Membership Term: September 1, 2009 – August 31, 2010
Please type or print clearly, or attach a business card.

Individual Member: _____ Title: _____

Institution: _____ Email: _____

Mailing Address: _____
City State Zip code

Toll Free (if available): _____ Phone (_____) _____

Fax (_____) _____ Website: _____

Secondary Schools Only: *High School (CEEb) Code: _____ Are you a NACAC Member? Yes No

Have you attended a HACAC State Conference? Yes No (if no, why not?): use back of sheet

Are you interested in being more involved in HACAC? Yes (please specify below) No

Conference Speaker HACAC Executive Board College Goal Sunday College Planning Night

Conference Planning Other _____

Hawai'i Membership (Institution must be located in Hawaii)	Unit Cost	Total
Individual (1 Voting) Hawai'i Membership	\$20.00	
Institutional (3 Voting) Hawai'i Membership ***Only one Institutional Membership per Hawai'i institution	\$45.00	
<small>For Institutional Membership: List up to 3 maximum members Please provide full name, title, email & phone</small>		
1: Self – Information included above		
2:		
3:		

Associate Non-Voting Membership (Retired, Student, Out-of State)	Unit Cost	Total
Retired Individual Membership	\$10.00	
Student Individual Membership	\$10.00	
Out of State Individual Membership ***Members whose institutions are located out of state	\$30.00	

Printed HACAC Directory \$5 per directory	Unit Cost	Total
HACAC Printed Directory: Number Purchasing _____ x	\$5.00	

TOTAL AMOUNT DUE: \$ _____

Note: This is your invoice. If your fiscal/business office requires an original invoice, you may send the copy to HACAC. Membership cannot be processed without a check or purchase order. HACAC does not accept online or credit card payments at this time. **Questions? Contact Marissa Dash at (808) 544-0249 or mdash@hpu.edu Mahalo!**

- Mail:** **1) This form (application/invoice)**
2) Check (made payable to HACAC) or Purchase Order to:

HACAC c/o Marissa Dash
Hawai'i Pacific University/Admissions
1164 Bishop Street, suite 200
Honolulu, HI 96813

For Office Use Only: (September 1, 2009 – August 31, 2010)		
Date:	Amount:	Check/PO: