

Improving the lives of women and girls through programs leading to social and economic empowermet.

SOROPTIMIST INTERNATIONAL OF HONOLULU

Membership/Renewal Application

Thank you for your interest in Soroptimist International of Honolulu! If you wish to improve the lives of women and girls in an atmosphere of support, friendship and fun, then being a Soroptimist is right for you. Please complete this form and return it with your dues payment to **P.O. Box 3341, Honolulu, HI 96801** or, if you are a new member, you can also turn in to your sponsoring Soroptimist member.

July 2021 to June 2022 Annual Membership Due	s: Make check payable to <u>SI Honolulu</u> .
 Regular (includes SIA and Founder Region Due Regular (If joining after December 31) 	es) \$165.00 \$110.00 (Discounted for partial year)
Name	
(If a returning member, please update your contact information for any CHANGES from the prior year)	
Preferred Mailing Address	
Preferred Contact Phone Number (indicate if work, home or cell)	
Email	
Employer	Position/Title
Birthdate (MM/DD/YY)(Note: Year is provide	ed only to SIA for purpose of their tracking demographics of overall membership)
Is it okay to include all of your membership information in the club directory \square Yes \square No	
If you answered no, please list what you do <u>NOT</u> want included in the club directory	
If you are a new member, how did you hear about Soroptimist and/or our club?	
Please indicate which committee(s) you would be	e interested in serving on in the coming year:
□ Awards □ Fundraising □ Membershi	p 🛛 Public Awareness 🔲 Service Project