



Young Okinawans of Hawaii

The Young Okinawans of Hawaii, P.O. Box 30965, Honolulu, HI 96820

For Board Use Only:

Date Received: _____

Paid by: Cash
 Check no. _____

Membership Application

The Young Okinawans of Hawaii is a non-profit organization of individuals whose goals are:

- To stimulate interest in and promote learning about the history of Okinawa and its people;
- To promote the preservation and perpetuation of the cultural heritage of Okinawa; and
- To provide social activities that will foster goodwill and friendship among its members.

Application for membership is open to all ages 18 and older. Membership and participation is also open to ages 18 and younger with written parental or guardian consent. The annual dues are \$10 per individual. Family (**nuclear family) annual dues are \$20. Subsequent annual dues are \$10/ \$20 for individuals and families.

Checks should be written to: **The Young Okinawans of Hawaii.**

- New Membership Membership Renewal

Why do you want to join The Young Okinawans of Hawaii and how did you hear about us?

Are you a member of any other Okinawan organizations? If so, please specify: _____

I am interested in participating in and/or am able to help with (check all that applies):

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Eisa | <input type="checkbox"/> Odori (dance) | <input type="checkbox"/> Uta-sanshin |
| <input type="checkbox"/> Uniform Making | <input type="checkbox"/> Historian (takes photos, videos of club events) | |
| <input type="checkbox"/> Okinawan Language | <input type="checkbox"/> Club Projects | <input type="checkbox"/> Other: _____ |

The club asks that you participate in at least two volunteer events to promote our organization and our community. Please pick two events that you would like to help and participate:

- Senior Luncheon
- Okinawa Festival (Food Booth)
- HOC Autumn Festival
- HOC Fundraisers such as Craft Fairs, Senior Fairs, etc.

We ask all members to contribute some time and volunteer to serve on the Board of Directors or as committee chairs for our YOH functions throughout the year. Please pick at least one position you are willing to assist.

- Board of Directors
- Social Committee
- Bon Dance / Culture
- Community Service
- Fundraising Committee
- Shinnen Enkai – New Year’s Banquet



Young Okinawans of Hawaii

I, the undersigned, on behalf of myself, my heirs, executors and administrators, next of kin, successors and assigns, insurers, and anyone able to claim through, by or under me, (1) waive, release, and discharge the Young Okinawans of Hawaii, its Officers, Advisors, volunteers, members and other related persons or entities from any and all liability for my personal injury, disability, death, property damage, property theft or actions of any kind which may hereafter accrue to me, including my participation with and traveling to and from any Young Okinawans of Hawaii activity, and (2) indemnify and hold harmless the Young Okinawans of Hawaii, its Officers, Advisors, volunteers, members and other related persons or entities from any and all liability and/or claims arising from my participation with any official Young Okinawans of Hawaii activities. I understand that when my application is accepted, I as a member agree to abide by the By-Laws of The Young Okinawans of Hawaii. In addition, I understand that photos and videos of my participation in club activities may be used for the club website, newsletter, information pamphlets and videos. If I am under 18 years of age, I understand that I must obtain a parent or guardian's signature for this application.

Family Last Name**	First Name of Key Contact	MI	Birth Date
Address	City, State	Zip Code	
Home Phone	Office Phone	Cellular	
Email	Fax	Referring Member	

HoH - Name: _____ Birth Date: _____
 Spouse Name: _____
 Child #1 Name _____
 Child #2 Name _____
 Child #3 Name _____

Signature: _____ Date: _____

Print Name: _____

****Note: Family is defined as Father, Mother, Son, Daughter and Grandparents only**

Parent or Guardian signature if applicant is below 18 years of age: By your signature, you represent that you have read and understand the terms and conditions for YOH membership set forth above.

Print Name of Child or Children

Child #1 _____ Birth date: _____
 Child #2 _____ Birth date: _____
 Child #3 _____ Birth date: _____

Signature: _____ Date: _____

Print Name & Relationship: _____

Please mail application to: The Young Okinawans of Hawaii
Attn: Membership
P.O. Box 30965
Honolulu, HI 96820