



OKINAWA ASSOCIATION OF AMERICA, INC.
 “HOKUBEI OKINAWA KENJINKAI”

NEW MEMBERSHIP FORM

Please make checks payable to “OKINAWA ASSOICATION OF AMERICA, INC”

<input type="checkbox"/>	Married Couple \$30	<input type="checkbox"/>	Single \$20 18+ years	<input type="checkbox"/>	80+ years old \$20 for 3 years then qualify for lifetime FREE membership
MAIN CONTACT					
LAST NAME		FIRST NAME		MIDDLE NAME	
DOB (MM/DD/YYYY)		BIRTHPLACE (CITY, TOWN, ETC.)			
OCCUPATION		OKINAWA ANCESTRIAL VILLAGE			
ADDRESS					
CITY		STATE		ZIP CODE	
HOME PHONE		CELL PHONE			
EMAIL		FAX			
SPOUSE INFORMATION					
LAST NAME		FIRST NAME		MIDDLE NAME	
DOB (MM/DD/YYYY)		BIRTHPLACE (CITY, TOWN, ETC.)			
OCCUPATION		OKINAWA ANCESTRIAL VILLAGE			
FAMILY INFORMATION - CHILDREN					
LAST NAME		FIRST NAME		MIDDLE NAME	
LAST NAME		FIRST NAME		MIDDLE NAME	
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FAMILY INFORMATION - CHILDREN					
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