



**UNITED JAPANESE SOCIETY OF HAWAII**  
2454 S. Beretania Street #303 - Honolulu, Hawaii 96826  
Telephone: (808) 941-5889 - Email: info@ujshawaii.org

**FISCAL YEAR 2023-2024 MEMBERSHIP FORM: RENEWAL \_\_\_\_\_ NEW \_\_\_\_\_**

Check one: \_\_\_ Applying as Rep of Organization \_\_\_ Applying as an Individual Date \_\_\_\_\_

Name (please print or type): \_\_\_\_\_  
LAST FIRST MIDDLE

Company/Organization (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip code

Phone: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Cellular) \_\_\_\_\_

Email: \_\_\_\_\_ Birthday (year optional): \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

**UJSH is an all-volunteer organization and succeeds with member participation. Please check areas you are interested in serving:**

I am interested in serving as a volunteer in the following area(s):					
<input type="checkbox"/> Administrative/ Bylaws	<input type="checkbox"/> Event planning	<input type="checkbox"/> Graphics	<input type="checkbox"/> Reception (greet ships)	<input type="checkbox"/> Seniors	<input type="checkbox"/> Standing committee
<input type="checkbox"/> Culture/ Education	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Office staff	<input type="checkbox"/> Remote work	<input type="checkbox"/> Social media/ Website	<input type="checkbox"/> UJSH event staff

Check the box(es) of the information you <b>DO NOT WANT TO SHARE</b> on the UJSH Membership Roster. <input type="checkbox"/> Address <input type="checkbox"/> Email <input type="checkbox"/> Home Phone <input type="checkbox"/> Business Phone <input type="checkbox"/> Cell Phone	<b>Annual Membership Rates</b>
	\$35: Individual/Organization \$ _____ \$20: Student (Under age 21) \$ _____ \$20: Senior (80 and + yrs old) \$ _____ Donation (Optional) \$ _____ TOTAL ENCLOSED \$ _____

**Consent to photos or video at UJSH events.** I consent to the photographs and recording of my image at UJSH events and grant to UJSH the right to copy, reproduce and use all or any portion of the said photos or videos for all purposes.

**Liability Waiver.** In consideration for participating in UJSH meetings and events, I hereby release, waive, discharge and covenant not to sue UJSH, its officers, servants, agents, and employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the UJSH, or otherwise, for any and all matters relating to UJSH, including but not limited to while participating in events or activities, or while in, on or upon the premises where the event or activity is being conducted or in transportation to and from said premises. I have read this waiver and fully understand its terms.

Signature \_\_\_\_\_ Sponsor (if applicable) \_\_\_\_\_

**Office Use (Rev 04-05-2023)**

Date	R#	Ck#/Cash	\$	Proc'd by
------	----	----------	----	-----------