



# AMERICAN PAYROLL ASSOCIATION

## *Hawaii Chapter*

### Membership Application

Check One: Company \_\_\_\_\_ Individual \_\_\_\_\_ Student \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Company Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

National APA Membership # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Please enroll me as a chapter member. Enclosed is a check for \$60 (plus \$20 for each additional member) payable to: The American Payroll Association Hawaii Chapter.

Student membership is \$15.00.

I am interested in participating in or finding out more about the following committees. (Circle all applicable):

- |             |                      |
|-------------|----------------------|
| *Membership | *Newsletter          |
| *Education  | *UH Learning Series  |
| *Activities | *Community Relations |

Name \_\_\_\_\_ Business Telephone \_\_\_\_\_

Name \_\_\_\_\_ Business Telephone \_\_\_\_\_

Return this application with your annual dues to:  
The American Payroll Association Hawaii Chapter  
c/o Stephanie Kaumeheiwa  
Alexander & Baldwin, Inc.  
822 Bishop Street  
Honolulu, HI 96813