



2019 MEMBERSHIP APPLICATION

The undersigned is applying to join the Royal Coconut Coast Association (RCCA) for the year of 2019. This membership entitles the firm listed below to all promotional opportunities, rights, privileges and benefits of membership in the Royal Coconut Coast Association throughout 2018. The undersigned agrees to join the Royal Coconut Coast as:

- A General Member
 A Lodging Member (TVR permit# _____)
 A Sustaining Member

Business or Organization Name: _____

Name of Manager or Owner: _____

Mailing Address: _____

Business Location (Physical Location in Kapa'a/Wailua): _____

Website Address: _____

Email Address: _____

Business Telephone #: _____ Fax# _____

Description of business activity within the Royal Coconut Coast region _____

By signing below, you agree to the terms associated with Royal Coconut Coast Association membership guidelines. Listed in our membership dues schedule, you will find the annual dues that best fit your organization. Your membership, including all benefits, will be activated upon receipt of membership dues and approval by the RCCA Board.

**Mail this document, along with a check made out to
Royal Coconut Coast Association, P.O. Box 1180, Kapa'a, HI 96746.**

New Member Signature _____ Date _____

Referred by: _____