

# West Maui Taxpayers Association Membership Application

## Contact Information

Name	
Street Address	
City, ST ZIP Code	
Day Phone	
Evening Phone	
E-Mail Address	

## Membership Type

Choose One Membership Type (membership is valid for one year)

- Individual (\$50.00)       Family (\$100.00)  
 Business (\$100.00)       AOA (Call 808-661-7990 or E-mail wmta@maui.net)

## Donation

If you would like to make an additional donation to your annual membership.

- \$200       \$100       \$50       \$25       Other \$ \_\_\_\_\_

## Payment Type

Please select your payment type.

- Cash (please do not mail cash)  
 Check (payable to "WMTA")  
 Credit Card - Will show on statement as "West Maui Improvement Foundation"

**All Information below is required for credit card transactions.**

**Please type or Print Clearly.**

Name on Card:			
Billing Address			
City ST ZIP Code			
Phone Number			
Card type:	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover Card <input type="checkbox"/> AMEX
Card Number:			
Card Expiration:		Security Code:	
Signature:			

## Comments

Please let us know how we're doing and what else you would like to see us do.