

MARUKAI CORPORATION

MEMBERSHIP APPLICATION AND AGREEMENT

EMPLOYEE NAME _____

MEMBERSHIP #

DATE _____

*Please check one of the following : (up to 2 names per 1 card ; must be within same household)

Regular Membership (under 62 years)

- Member Fee = \$10.00
2 Year Member Fee = \$15.00
3 Year Member Fee = \$20.00
2nd Card = \$2.00

Regular Membership (62 years & over)

- Senior Member Fee = \$5.00
2 Year Senior Member Fee = \$8.00
3 Year Senior Member Fee = \$10.00
2nd Card = \$2.00

Please note, for the two and three year memberships; we can not give a refund for cancelations. Also you can not combine the membership promotions together.

*Please print in block letters

< Primary Card Holder >

FIRST NAME
LAST NAME

< Secondary Card Holder > Optional

FIRST NAME
LAST NAME

< Home Address >

STREET:
APT #: CITY:
STATE: ZIP CODE:
HOME PHONE: () -

E-MAIL ADDRESS:

*Please do not send me e-mail from MARUKAI about special offers, or promotion.

I / We hereby state that all information given on the application is true and can be verified. I / We have read and understand Marukai membership rules and regulations and agree to follow them.

< Primary Card Holder >

< Secondary Card Holder > Optional

SIGNATURE

SIGNATURE

DATE

DATE