

2024 Membership Application
Please Submit this Completed Form By One of the Following Methods To Join the Chapter

Name:	
Company:	
Phone: Email:	
Mail	E-mail
NARPM Oahu Chapter ATTN: Membership Committee PO BOX 1353 Aiea HI 96701	narpm.oahuchapter@gmail.com
Director. Prim Nakamoto PH: (80	estions about registration contact: 18) 224-4044 EMAIL: Alohaprim@gmail.com 1206-8907EMAIL: <u>Marybel.Aspili@yahoo.com</u>
member in good standing of the Na Managers. I agree to abide by the Na information contained herein is to membership in the NARPM Oahu Ch	opplication, I affirm that I am a current tional Association of Residential Property NARPM® Code of Ethics and I affirm that the rue and accurate. I understand dues cover apter until December 31, 2024, and are I agree that if my check is returned a
Signature:	
PAYMENT METHODS	
Payment due by January 31, 2024	/ with Check
 Make check payable to: "NARPM-Oahu C Enclose check to this application in the ar Mail Payment & this Completed Form to: 	Chapter" mount of \$30.00. Check #
P	PayPal
(Processing fee will apply)	