

## 2025 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
For information or quest	tions about registration contact:
	8) 741-6341 EMAIL <u>: allenNARPMhawaii@gmail.com</u> 292-5228 EMAIL <u>: jasNARPMhawaii@gmail.com</u>
accurate. I understand dues cover member	affirm that I am acurrent member in good Residential Property Managers. I agree to abide In that the information contained herein is true and ership in the NARPM Oahu Chapter until December Inrefundable. I agree that if my check is returned a
Signature:	
PAYMEN	IT METHODS
Payment due by April 1, 2025	
<ul> <li>Make check payable to: "NARPM-Oa</li> <li>Enclose check to this application in th</li> <li>Mail Payment &amp; this Completed Form</li> <li>.</li> </ul>	e amount of <b>\$50.00</b> . Check #
Eve	entbrite

(Eventbrite Processing Fee will apply)