



**THE CALEDONIAN SOCIETY OF HAWAII**  
**2017-2018 New Member Application and Member Renewal Form**

**Annual Membership is \$30 per person, due by July 1<sup>st</sup> of each year.  
 Our fiscal year runs from July 1<sup>st</sup> to June 30<sup>th</sup>.**

**Personal information/update as needed**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Birthday** Month/Day/Year \_\_\_\_\_ **Clan Affiliation** \_\_\_\_\_

**Rides to events:** Do you need one? \_\_\_\_\_ Can you provide one? \_\_\_\_\_

**Volunteers** are welcome. Where can you help? Check all that apply.

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Refreshments | <input type="checkbox"/> Public relations  | <input type="checkbox"/> Reservations      |
| <input type="checkbox"/> Clean up     | <input type="checkbox"/> Entertainment     | <input type="checkbox"/> Educational       |
| <input type="checkbox"/> Decorating   | <input type="checkbox"/> Piping or dancing | <input type="checkbox"/> Serve on Council  |
| <input type="checkbox"/> Publicity    | <input type="checkbox"/> Telephoning       | <input type="checkbox"/> Highland Festival |

What is your profession? \_\_\_\_\_

Do you have children who would like to participate in the Games or events? \_\_\_\_\_

Do you have a family history to share? \_\_\_\_\_ Share below.

\_\_\_\_\_  
 \_\_\_\_\_

**ANNUAL DUES July 1, 2017 to June 30, 2018**

**Membership \$30 per person:** \$ \_\_\_\_\_

**Additional Tax-deductible donation:** \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

**Please make checks payable to: The Caledonian Society of Hawaii.**

**Mail to: P.O. Box 4164, Honolulu, HI 96812-4164**

**Questions: Call Jeannie Ferrier, Membership Secretary 808-593-0966**

**Or email her at [jferrier@msn.com](mailto:jferrier@msn.com)**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Were you recruited to join the Society? By whom?** \_\_\_\_\_

For membership secretary only: Check \_\_\_\_\_ Cash \_\_\_\_\_ Date Received \_\_\_\_\_