



# KONA EXECUTIVES ASSOCIATION

Post Office Box 2314, Kailua-Kona, Hawaii 96745  
Contact: Linda Adams, Executive Director, (808) 333-6598  
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## MEMBERSHIP APPLICATION

### THE PROPOSED FIRM

FIRM NAME:				DATE:	
FIRM ADDRESS:			CITY:		ZIP:
PHONE:	EXT.	FAX:	CELL:	E-MAIL:	
MY FIRM IS A (circle one)		CORPORATION	PARTNERSHIP	SOLE PROPRIETORSHIP	
		FRANCHISE	HOME OFFICE	BRANCH	
TOTAL EMPLOYEES:		FULL TIME:		PART TIME:	
HOW LONG HAS YOUR FIRM BEEN IN BUSINESS IN HAWAII?				# OF LOCATIONS:	
CLASSIFICATION OF BUSINESS:					
THIS CLASSIFICATION REPRESENTS _____ OF MY FIRM'S TOTAL VOLUME. ( Must be 75% or more )					
IF THIS FIRM IS DOING BUSINESS UNDER OTHER NAMES, DBA's, OR TRADE NAMES, INCLUDE ALL SUCH NAMES AND DESCRIBE BOTH THE PRIMARY AND SECONDARY AREAS OF BUSINESS INVOLVEMENT FOR EACH.					
_____					
_____					
IF OTHER BUSINESSES ARE OWNED/OPERATED BY THIS PROPOSED FIRM OR THE MAJORITY OWNERS OF THIS FIRM, LIST THEM AND PROVIDE THEIR PRIMARY AND SECONDARY AREAS OF BUSINESS INVOLVEMENT:					
_____					
_____					

LIST THREE CREDIT REFERENCES FOR YOUR FIRM:		
COMPANY NAME / CONTACT PERSON	ADDRESS:	TELEPHONE:
LIST TWO PERSONAL REFERENCES FOR PROPOSED REPRESENTATIVE:		
CONTACT PERSON	ADDRESS:	TELEPHONE:



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## MEMBERSHIP APPLICATION

### THE PROPOSED REPRESENTATIVE

NAME OF PROPOSED REPRESENTATIVE:	YEARS WITH FIRM:
REPRESENTATIVE'S TITLE:	
EXPLAIN, IN DETAIL, <u>YOUR</u> DUTIES AND RESPONSIBILITIES WITHIN THE FIRM:	
_____	
_____	

( An Organizational Chart/Corporate Structure must accompany this application. )

<u>LIST CLUBS AND ORGANIZATIONS OF WHICH THE PROPOSED REPRESENTATIVE IS A MEMBER:</u>		
ORGANIZATION NAME	YEARS OF MEMBERSHIP	OFFICES HELD

WHY WOULD YOU LIKE TO BECOME A MEMBER OF THIS ASSOCIATION?

\_\_\_\_\_

\_\_\_\_\_

HOW WILL YOUR MEMBERSHIP GENERATE QUALITY BUSINESS LEADS FOR MEMBERS OF THE ASSOCIATION?

\_\_\_\_\_

\_\_\_\_\_

### MUST BE FILLED OUT BY SPONSORING MEMBER:

MEMBER NAME:	MEMBER NUMBER:
HOW LONG HAVE YOU KNOWN THIS PROPOSED COMPANY?	PROPOSED MEMBER?
HAVE YOU DONE BUSINESS WITH THIS COMPANY ( ) Yes ( ) No THIS PERSON ( ) Yes ( ) No	