



Big Island Dance Council

P. O. Box 1571, Hilo, Hawaii 96721-1571

Today's Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (H): _____ Phone (B): _____

Fax #: _____ Phone (C): _____

Email Address: _____

- | | 1 Year | 2 Years |
|--|---------------|----------------|
| <input type="checkbox"/> Student or Senior | \$10.00 | \$15.00 |
| <input type="checkbox"/> Individual | \$15.00 | \$25.00 |
| <input type="checkbox"/> Family (2 Cards) | \$30.00 | \$50.00 |
| <input type="checkbox"/> Business (2 Cards) | \$50.00 | \$90.00 |
| <input type="checkbox"/> Supporter (Program Listing, 2 Cds) | \$250.00 | \$450.00 |
| <input type="checkbox"/> Patron (Program Listing, 4 Cards) | \$500.00 | \$900.00 |
| <input type="checkbox"/> Lifetime Individual (4 Installments of \$200 ea.) | | \$800.00 |
| <input type="checkbox"/> Benefactor (Program Listing, Galas, 4 Cards) | | \$1,000.00 |
|
 | | |
| <input type="checkbox"/> I want to make an additional contribution of _____
to support BIDC education programs! | | |
| <input type="checkbox"/> I am available to volunteer. (We love our volunteers!!) | | |

Mail to: **Big Island Dance Council**
P. O. Box 1571
Hilo, HI 96721-1571