



Business Membership Categories

Category	Annual Investment	Description
Small Business Circle	\$850	Includes up to THREE [3] members LOGO on HJCC WEBSITE homepage as a Small Business Circle Member
Corporate Circle	\$1,200	Includes up to FIVE [5] members LOGO on HJCC WEBSITE homepage as a Corporate Circle Member
Executive's Circle	\$1,500	Includes up to SEVEN [7] members LOGO on HJCC WEBSITE homepage as an Executive's Circle Member
Director's Circle	\$1,800	Includes up to TEN [10] members LOGO on HJCC WEBSITE homepage as a Director's Circle Member
President's Circle	\$2,500	Includes up to FIFTEEN [15] members LOGO on HJCC WEBSITE homepage as a President's Circle Member
Chairman's Circle	\$3,000	Includes up to TWENTY [20] members LOGO on HJCC WEBSITE homepage as a Chairman's Circle Member

Purchases from and contributions or gifts to the Honolulu Japanese Chamber of Commerce (HJCC) are not deductible as charitable contributions.

MEMBER CONTACT INFORMATION *(Please use individual application for each member information)*

PLEASE TYPE OR PRINT LEGIBLY

Note: This Information will be used in the Membership Directory.

Mr. Mrs. Ms. Dr. First Name: _____ Last Name: _____

Title/ Position: _____

Company: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Direct Business Phone: _____ Main Business Phone: _____ Fax: _____

Email: _____ Company Website: _____

Type of Business: _____

Products and/or Services Provided: _____

Number of Employees: 1-50 51-250 251-499 500+ Is Your Company Based in Japan: Yes No

PRIMARY CONTACT INFORMATION

Mr. Mrs. Ms. Dr. First Name: _____ Last Name: _____

Title/ Position: _____

Direct Business Phone: _____ Email: _____

Membership Level (Check One)

- Small Business Circle (\$850)
- Corporate Circle (\$1,200)
- Executive's Circle (\$1,500)
- Director's Circle (\$1,800)
- President's Circle (\$2,500)
- Chairman's Circle (\$3,000)

Payment Method

VISA Master Card. Check

Name on Card: _____ Expiration Date: _____

Credit Card Number: _____ CVV Code (3-digit code on back of CC): _____

Billing Address: _____ Billing Zip Code: _____

Email where payment receipt is to be sent: _____

Signature: _____ Date: _____

PLEASE SEND COMPLETED APPLICATION & PAYMENT TO:

Honolulu Japanese Chamber of Commerce
2454 S. Beretania Street, Suite 201
Honolulu, HI 96826

Fax: (808) 949-3020 | Email: membership@hjcc.org

*All membership applications are reviewed for approval by our Board of Directors.
Upon acceptance, a written confirmation will be forwarded to each new member.*

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