



DESTINATION KONA COAST

PO BOX 2850

Kailua-Kona, HI 96740

(808) 329-6748

www.destinationkonacoast.com

email: info@destinationkonacoast.com

Name of Business/Organization/Individual: _____

Contact Person: _____

Title: _____

Street Address/PO Box: _____

City: _____

ST: _____

ZIP: _____

Telephone: _____

Fax: _____

Cell: _____

Website: _____

Email address: _____

Membership Level:



Monthly Rate \$ 25/Month (No minimum term)

Yearly Rate \$250/Year

Make checks payable to: Destination Kona Coast or use a credit card

VISA MC AMEX CC# _____ EXP ____/____

How did you hear about Destination Kona Coast: _____

Membership Benefits:

- Brochures displayed at the Aloha Booth on the pier
- Volunteers recommend your place of business
- DKC's web site will list your business and a link to your web site
- Access to updated ship schedule
- Membership list available to members only