

## Learning Events-Manta Night Dive

Date:

Time:

Where:

Cardholder Signature

Sunday, October 5, 2008

2:00 p.m. - 10:00 p.m.

Jack's Diving Locker

Complete the payment form and return to The Kohala Center by fax at 808-885-6707.

Cost:	\$50.00 Members				
	\$150 New membership plus event participation				
Name					
Address					
Address					
City		State	Zip		
Phone		Cell			
E-mail					
			Inci	lude check or pay	y by credit card
Please charge my cr	edit card for the amoun	t specified above:			
		1		1	
Name as it appears on the o	redit card	Acct. No.		Expiration	CCV
Billing address for Credit c	ard if different than above	City, State		Zip	

If you have any questions, please contact The Kohala Center at info@kohalacenter.org or Tel. 808-885-6707

E-mail: info@kohalacenter.org visit: www.kohalacenter.org