



Advantage Renewal Application

June 1, 2016 – May 31, 2017

Membership Name: (Name or Title on Deed)

Type:

I = Individual
M = Multiple Properties
CO = Co-Owners
B = Business (Corporation, Partnership)
FP = Family Partnership
T = Trust

Table with columns: Cardholder Details (Code, Last Name, First Name, Title/DOB), Cards Received By, Date, Email Required per card, Received.

I OWN THE FOLLOWING PROPERTY AT MAUNA LANI RESORT:

Table with 4 columns for TMK (Tax Map Key) information.

MAILING ADDRESS:

Form fields for mailing address: City, State, Zip, Country.

Mauna Lani Resort Phone:

Mauna Lani Resort Fax:

Form fields for phone numbers: Home Phone, Primary Cell Phone.

Form fields for fax numbers: Home Fax, Cell Phone # 2.

EMAIL ADDRESS(S):

NECESSARY TO RECEIVE ADVANTAGE MEMBER NOTICES AND SPECIAL OFFERS AT MAUNA LANI RESORT

Form with two numbered columns for email addresses.

The undersigned has read the Mauna Lani Advantage program Benefits Summary. Upon acceptance by Mauna Lani Realty, Inc. of this renewal application, I agree, and all authorized members agree, to comply with all Rules and Regulations of the Advantage Program

X _____ Date: _____
Signature of Primary Membership Holder

SPECIAL INSTRUCTIONS:

[] I am currently on Island

I plan to arrive on: _____

Photo Option Box: [] Use same photo [] Take new photo

PLEASE RETURN TO: Office Hours Monday to Friday 9 am to 5pm

Mauna Lani Realty, Inc. | 68-1400 Mauna Lani Drive | Suite 108 | Kohala Coast, HI 96743

OFFICE: 808.885.6688 | FAX: 808.885.7974 | EMAIL: ADVANTAGE@MAUNALANIREALTY.COM

FOR OFFICE USE ONLY: Approved By: _____ Date: _____
Guest Card: _____ Fee paid: _____