

Adult Loss of Hearing Association

4001 E Ft Lowell Road Tucson, AZ 85712

Membership Form

*CATEGORIES	COST	LENGTH OF TIME
Individual Member	\$35.00	1 Year Membership (See below)
Family Membership	\$40.00	1 Year Membership (See below)
Business / Organization Member	\$75.00	1 Year Membership (See below)
Donation (In addition to Membership)	\$	
Total Enclosed: \$		
Make Check Payable to ALOHA (See address above) or go to alohaaz.org and click on "Donate"		
Note: ALOHA is a non-profit organization in accordance with Section 501(c)(3) of the IRS Code.		
Your donation may be tax deductible. Thank you for supporting ALOHA!		
NAME (First, MI, Last, Nickname):		
Significant Other:		
Street Address:		
City, State, ZIP Code:		
Home Phone:		
Work Phone:		
Cell Phone Number:		
Email Address:		
Emergency Contact Information (Optional, But Recommended):		
Name:	` .	·
Phone:		
Relationship:		
All members receive discounts on classes we offer at ALOHA.		
o you also want to receive the ALOHA e-Updater (our email newsletter)? Yes No		

If a new member, how did you hear about ALOHA? _