

**SOCIETY OF FIRE PROTECTION ENGINEERS  
HAWAII CHAPTER  
INFORMATION FORM FOR CHAPTER FRIEND**

PLEASE COMPLETE

Name: \_\_\_\_\_  
                                First                                Middle                                Last

Email \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (       ) \_\_\_\_\_ Fax (       ) \_\_\_\_\_

The address shown above is your: \_\_\_\_\_ business address \_\_\_\_\_ home address

**Fee (1 year)**                                **\$20.00**    Make checks payable to **Hawaii Chapter SFPE**

Date \_\_\_\_\_

Chapter friends will receive discounts on all Hawaii Chapter SFPE events and will receive all Chapter announcements. Chapter Friends are entitled to one discount per event.

Please return to:

**Hawaii Chapter SFPE  
c/o 501 Sumner Street, Suite 421  
Honolulu, HI 96817  
Tel (808) 526-9019/Fax (808) 537-5385  
sdannaway@ssdafire.com**

Rev 26 August 2013