



SPOUSE SPECIAL

SENIOR CLUB APPLICATION FORM

SPOUSE #1: Membership # (required if renewing card): _____ Expiration Date: _____

Last Name (As appears on ID): _____ First: _____ M.I. _____

Age: _____ Date of Birth: _____ Last 4-digits of SSN# or Other ID #: _____

SPOUSE #2: Membership # (required if renewing card): _____ Expiration Date: _____

Last Name (As appears on ID): _____ First: _____ M.I. _____

Age: _____ Date of Birth: _____ Last 4-digits of SSN# or Other ID #: _____

Mailing Address: _____ City: _____

State: _____ Zip Code: _____ Telephone #: _____ Verified by: _____

Email Address (if available): _____

Signature: _____ Date: _____

Both individuals must be 65 years or older to qualify. Membership/renewal fee for the spouse special is \$25/yr for 2 cards, lost or replacement card is \$5 per card. Applications can be turned in at any Zippy's Restaurant or the Zippy's Administration office, 1765 South King Street, Honolulu, HI 96826, Monday to Friday, 8:00 am to 4:30pm. If mailing application, please enclose a copy of ID for verification, otherwise ID must be shown at time of application. Telephone 973-0880. Zippy's reserves the right to change, alter, modify or discontinue this program at any time without notice.