

ZIPPY'S

Spouse Membership

A "2 for \$25" membership fee will be offered for married couples living at the same address (one card for each spouse).
Both individuals must be 65 years or older to qualify.

To be completed by Zippy's Office

Verified By: _____

Store: _____

Date: _____

SPOUSE # 1 Membership # _____

Expiration Date: ____/____/____

Last Name: _____

First Name: _____ M.I.: _____

Last 4 of SSN# or ID: _____

Date of Birth: ____/____/____ Age: _____

Telephone # _____

Email Address: _____

SPOUSE # 2 Membership # _____

Expiration Date: ____/____/____

Last Name: _____

First Name: _____ M.I.: _____

Last 4 of SSN# or ID: _____

Date of Birth: ____/____/____ Age: _____

Telephone # _____

Email Address: _____

Mailing Address _____ Apt/Unit # _____

City _____ State _____ Zip Code _____

Signature Spouse # 1 _____ **Spouse # 2** _____ **Date:** _____

By providing your email address you are opting into Zippy's Restaurants emails. Applications can be turned in at any Zippy's Restaurant or the Zippy's Administration Building, 1765 South King Street, Honolulu, HI 96826, Monday to Friday, 8:00 AM to 4:30 PM. If mailing application, please make check payable to "FCH Enterprises Inc." and enclose a copy of ID for verification. Telephone 808-973-0880. Zippy's reserves the right to change, alter, modify or discontinue the Senior Club Membership program at any time without notice.