

REPLACEMENT GOLF ID CARD

Please print. Fee Required

Name: _____ Current ID Number: _____
Last First MI

New ID Number: _____

Address _____
Street Apt City Zip Code

Date of Birth: _____ Daytime Phone Number: _____

To be completed by staff:

Card Made By: _____ Replacement paid via: Fee Paid OR Surrendered Receipt
Staff Name Date Circle One

(Staple Receipt To This Request)

Rev. 8/03

CITY & COUNTY OF HONOLULU GOLF ID CARD REGISTRATION FORM
(Hawaii Residents Only)*

Please Print!

HAWAII DRIVER'S LICENSE NUMBER: _____

Do not use your Social Security Number!

(The new standardized Hawaii Driver's License number [w/"H" prefix] will be used for the express purpose of identification [your access code to the system]. If you do not to have the new Hawaii Driver's License number, you will be assigned a unique 9-digit number.)

NAME: _____ DATE OF BIRTH: _____
Last First MI

ADDRESS: _____ **Totally Disabled: No Yes
(Circle One)

CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ EXT. _____

Database information may be subject to disclosure as public records under Section 92F-11, Hawaii Revised Statutes.

*Document(s) are required to validate residency, total disability, and date of birth (if 65 or older):

For Residency: Valid Hawaii Drivers License or

- a. Last year's Hawaii State tax return.
- b. Real estate property tax bill for your Hawaii residence.
- c. Homeowner's insurance policy for your Hawaii residence.
- d. Hawaii Voter Registration Certificate
- e. Active duty military ID card.

For Date of Birth: Hawaii Drivers License or

- a. Birth Certificate
- b. C&C of Honolulu Bus Pass

**For Total Disability: (Qualifies for Sr. rates)
Hawaii Dept. of Taxation Form N-172

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