

Please e-mail, fax or call with the following information:



Child's Name: \_\_\_\_\_  
Last First

Gender \_\_\_\_\_ Age \_\_\_\_\_ Birth Date (mo/day/yr) \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Alternate Ph. # ( ) \_\_\_\_\_

Dates of Participation: (mo/day/yr) \_\_\_\_\_

**E-mail address: [keikiclub@kahalaresort.com](mailto:keikiclub@kahalaresort.com)**

**Keiki Club fax line: 1-808-739-8975**

**Keiki Club Direct Line: 1-808-739-8608**

**Website: [www.kahalaresort.com](http://www.kahalaresort.com)**



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