

Ha Ala Loa O Kukuipuka
Anointing the Path of the Light

Registration Form

Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Country: _____ (other than USA)

Phone: _____

Alt Phone: _____

Email Address: _____

**Please submit your personal check or money order with
completed registration form to:**

**Kukuipuka
P.O. Box 575
Kula, HI. 96790**

Personal check or MO# _____