



# Kiwaniis Club of Columbine Membership Application

Kiwaniis Key No: **K09063**

Prefix	First	Middle	Last	Suffix	Nickname	M/F

**Home**

Street		
Box/Apt		
City	State	Zip

**Telephone**

Home
Mobile
Work
Fax

**Work**

Title:		
Company		
Street1		
Street2		
City	State	Zip

**Email Addresses**

Email1
Email2

**Mail Preference**

Where do you prefer Kiwanis mail sent?

Home Address     Work Address

<b>Primary Employment</b> <input type="checkbox"/> 01 Banking/Finance <input type="checkbox"/> 17 Medical <input type="checkbox"/> 03 Comm/Media <input type="checkbox"/> 19 Non-profit <input type="checkbox"/> 05 Construction <input type="checkbox"/> 21 Real Estate <input type="checkbox"/> 07 Education <input type="checkbox"/> 23 Religion <input type="checkbox"/> 09 Government <input type="checkbox"/> 25 Retail <input type="checkbox"/> 11 Legal <input type="checkbox"/> 27 Transportation <input type="checkbox"/> 13 Manufact.(Heavy) <input type="checkbox"/> 29 Wholesale <input type="checkbox"/> 15 Manufact.(Light) <input type="checkbox"/> 94 Other	<b>Job Classification</b> <input type="checkbox"/> N Elected <input type="checkbox"/> O Management <input type="checkbox"/> P Partner/Owner <input type="checkbox"/> Q Professional <input type="checkbox"/> R Sales <input type="checkbox"/> S Supervision <input type="checkbox"/> T Technical <input type="checkbox"/> V Retired <input type="checkbox"/> X Other	<b>Education Attained</b> <input type="checkbox"/> A Grade School <input type="checkbox"/> B High School <input type="checkbox"/> C Tech Business School <input type="checkbox"/> D Assoc Degree (2 yrs) <input type="checkbox"/> E Baccalaureate Degree (4 yrs) <input type="checkbox"/> F Masters Degree <input type="checkbox"/> G Grad Prof Degree
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**Personal**

Birth Date:	Spouse Name:	Anniversary Date:
Children Names		

**Kiwanis Related:** Applicant: Please fill out as much as you can

Date Joined	Kiwanis Member No	Prev Kiwanis Club Name:
Sponsor:	Date Left Prev Club:	Yrs At Prev Club:
Life Number if Applicable:	Committee Preference:	<input type="checkbox"/> Club Administration or <input type="checkbox"/> Community Service
Date Init Fee Paid	Init Fee Amt	Preferred Billing Period <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly

**Community Needs:** What do you see as the most important need(s) of this community now? Any other comments?

I understand that a background check will be required, in order to finalize my application for membership in the Columbine Kiwanis Club.

Background Check Completed by:

**Signature**       **Date:**