

**New Member Information Form**

**Member Type\***

New Kiwanis Member \_\_\_\_ Former Kiwanis Member \_\_\_\_ Current Kiwanis Member \_\_\_\_ Transferring Kiwanis Member \_\_\_\_

Honorary Kiwanis Member \_\_\_\_ Corporate Kiwanis Member \_\_\_\_ Former Service Leadership Program Member \_\_\_\_

If Former Member, or Transferring, Club Name: Years Member:

**Sponsor Name(s):** NAME KIWANIS CLUB

NAME KIWANIS CLUB

**Contact Information:**

Prefix: Mr. \_\_\_\_ Mrs. \_\_\_\_ Ms. \_\_\_\_ Dr. \_\_\_\_ Rev. \_\_\_\_ None \_\_\_\_ Other:

Full Name\* Preferred Gender:

 LAST FIRST M.I.

Preferred Mailing Address\*:

 STREET

 HOME \_\_\_ WORK \_\_\_\_

 CITY STATE ZIP

Phone:

 (circle preferred) HOME MOBILE WORK

Preferred Email:

**Background Information:**

Birthday: Place of Birth:

 MONTH DAY YEAR

Employer (If retired, former Occupation):

Spouse/Partner Name: Anniversary Date:

By completing this application for membership, I agree to conform to the bylaws of this club and comply with the obligations of membership as explained to me by my sponsor. In the United States, US$8 of a member’s annual dues and fees is applied to a Kiwanis magazine subscription. Additional membership dues and fees will be charged.

Signature\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (mo/day/yr)

**Elected to Membership by Board of Directors:**

Date: Secretary Signature:

 (mo/day/yr)