



Kiwanis[®]

OAKLAND PARK

New Member Application Form

Full Name _____ Nickname _____ Gender _____

Home Address _____
City _____ St. _____ Zip _____

Address for Kiwanis Directory _____

Phone Nbr for Kiwanis Directory _____ Cell, Home, Work? _____

Email for Kiwanis Directory _____ Birthdate _____

*Spouse/Partner Name _____ Anniversary Date _____

Are you a former Kiwanian? _____ If so, where? _____

Is the address listed above where you would like Kiwanis mail delivered? _____

If not, where? _____

How did you find out about Kiwanis? _____

Our dues are \$160.00 per year. Our fiscal year begins on October 1 and ends on September 30th. Currently we meet in person on the 1st and 3rd Wednesday of the month at Mt. Zion AME Church at 7:30 am. The address is 420 NW 33 ST, Oakland Park, FL. Your first 2 breakfasts, which include coffee and a pastry, are on us.

You can contact our membership coordinator, Dennis Buchta at brotoolrepr@aol.com for more information or to answer any questions you might have. Please ask for Dennis or Marylou Adams at your first meeting.

Please Sign and Date below. I accept this application for membership and agree to conform to the bylaws of this club and comply with the obligations of membership.

Date _____ Applicant Signature _____

*Optional