



## Kiwaniis Club of Picton Membership Application

### Applicant:

Full name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Gender: \_\_\_\_\_

Home address: \_\_\_\_\_ Spouse/Partner Name: \_\_\_\_\_  
Postal code \_\_\_\_\_

Phone: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Home Mobile Work

Email: \_\_\_\_\_ Date of Birth (Day/Month Only): \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Address: \_\_\_\_\_

Former Kiwanian? Club Name: \_\_\_\_\_ Date left: \_\_\_\_\_  
Mo./day/year

Length of membership: \_\_\_\_\_ Your number, if a life member \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

### Sponsors:

***"To the board of directors: I take pride in this recommendation and am confident this individual will be an active and valuable member"***

\_\_\_\_\_ Date: \_\_\_\_\_  
Print name Signature