



## Membership Information Blank Kiwaniis Club of Jefferson

Name _____	Nickname _____
Home Address _____ Zip Code _____	Home Phone _____
Firm Name _____	E-mail Address _____
Business Address _____ Zip Code _____	Type of Business _____
	Business Phone _____

Title of your position \_\_\_\_\_  
Educational background \_\_\_\_\_

Where do you prefer Kiwanis mail sent?     Home address     Business address

Are you a former Kiwanian?     Yes     No    Name of Club \_\_\_\_\_

Length of membership \_\_\_\_\_    How long have you lived in our community? \_\_\_\_\_

Who was your Kiwanis sponsor? \_\_\_\_\_

Your birthday \_\_\_\_\_    Wedding anniversary \_\_\_\_\_

Spouse's birthday \_\_\_\_\_    Spouse's first name or nickname \_\_\_\_\_

First name and ages of children \_\_\_\_\_

Membership in business and professional organizations:

\_\_\_\_\_

\_\_\_\_\_

What are your hobbies? \_\_\_\_\_

Would you prefer that your first committee assignment in this Club be related to:

Club Administration (Club Meetings, Programs, Membership Growth, the Club Bulletin, etc.)

Community Service (Direct Services to Children, Youth and Adults, Assistance in Solving Community Concerns, etc)

What do you see as the most important need(s) of this community now?

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_    Signed \_\_\_\_\_

This information blank is to presented to each new member immediately after his/her proposal is accepted by the board of directors and is to be returned to the club secretary prior to the new member's induction.