

MEMBERSHIP APPLICATION

PLEASE TYPE OR PRINT

| | | | |
|-------------------------------|----------------------------|---|-----------------------------|
| KIWANIS CLUB OF AURORA | KEY NUMBER K0007 | DISTRICT NAME OR NUMBER 11 DISTRICT | STATE/PROVINCE IL |
|-------------------------------|----------------------------|---|-----------------------------|

ANNUAL DUES: **CLASSIC: \$450.00*** **K-LITE: \$225.00** **SENIOR: \$160.00** To pay online visit:
(INCLUDES MOST MEALS) (PAY \$10 PER MEAL) (PAY \$10 PER MEAL) **aurakiwanis.org and click DONATE**

NEW APPLICANT CLASSIC K-LITE SENIOR CORP.
FOR CLUB USE ONLY

| | | | | |
|-----------|--------|------------|----------|----------------|
| LAST NAME | SUFFIX | FIRST NAME | NICKNAME | MIDDLE INITIAL |
|-----------|--------|------------|----------|----------------|

| | | | | |
|---|---------------|------------|------------|-------------------------------|
| GENDER <input type="radio"/> M <input type="radio"/> F | DATE OF BIRTH | HOME PHONE | CELL PHONE | EMAIL ADDRESS (PRINT CLEARLY) |
|---|---------------|------------|------------|-------------------------------|

| | | | | | |
|--------------|------|-------|-----|---------------------|--------|
| HOME ADDRESS | CITY | STATE | ZIP | SPOUSE/PARTNER NAME | D.O.B. |
|--------------|------|-------|-----|---------------------|--------|

| | | |
|---------------|----------------|------------------|
| BUSINESS NAME | TITLE/POSITION | BUSINESS ADDRESS |
|---------------|----------------|------------------|

| | | | | |
|------|-------|-----|----------------|------------|
| CITY | STATE | ZIP | BUSINESS PHONE | FAX NUMBER |
|------|-------|-----|----------------|------------|

| | | | | |
|---|-----------|---|-------------------|------------------------------|
| FORMER MEMBER <input type="radio"/> YES <input type="radio"/> NO | CLUB NAME | MULTIPLE MEMBERSHIP <input type="radio"/> YES <input type="radio"/> NO | IF YES, CLUB NAME | DATE JOINED (MONTH/DAY/YEAR) |
|---|-----------|---|-------------------|------------------------------|

SEND KIWANIS MAIL TO: HOME WORK APPLICATION SIGNATURE _____ DATE _____

CHECK ONE BLOCK PER CATEGORY

PRIMARY EMPLOYMENT Codes

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> 1 Banking/Finance | <input type="checkbox"/> 11 Legal | <input type="checkbox"/> 21 Real Estate | <input type="checkbox"/> 31 Agriculture |
| <input type="checkbox"/> 3 Communications/Media | <input type="checkbox"/> 13 Manufacturing (Heavy) | <input type="checkbox"/> 23 Religion | <input type="checkbox"/> 94 Other _____ |
| <input type="checkbox"/> 5 Construction | <input type="checkbox"/> 15 Manufacturing (Light) | <input type="checkbox"/> 25 Retail | |
| <input type="checkbox"/> 7 Education | <input type="checkbox"/> 17 Medical | <input type="checkbox"/> 27 Transportation | |
| <input type="checkbox"/> 9 Government | <input type="checkbox"/> 19 Nonprofit | <input type="checkbox"/> 29 Wholesale | |

JOB CLASSIFICATION Codes

- | | |
|--|--|
| <input type="checkbox"/> N Elected | <input type="checkbox"/> S Supervision |
| <input type="checkbox"/> O Management | <input type="checkbox"/> T Technical |
| <input type="checkbox"/> P Partner/Owner | <input type="checkbox"/> V Retired |
| <input type="checkbox"/> Q Professional | <input type="checkbox"/> X Other _____ |
| <input type="checkbox"/> R Sales | |

EDUCATION ATTAINED Codes

- | | |
|---|---|
| <input type="checkbox"/> A Grade School | <input type="checkbox"/> F Master's Degree |
| <input type="checkbox"/> B High School | <input type="checkbox"/> G Graduate Professional Degree |
| <input type="checkbox"/> C Technical/Business School | <input type="checkbox"/> H College/University Attended |
| <input type="checkbox"/> D Associate Degree (2 yrs) | |
| <input type="checkbox"/> E Baccalaureate Degree (4 yrs) | |

Sponsors Signature: _____ Date: _____

Elected to Membership by Board of Directors

Date: _____ Secretary Signature: _____

- Application Routing: Secretary Treasurer VP Newsletter
- Membership Comm. Hewitt Merit Award New Badge

Tear Off

Receipt

Date _____
 Received of _____ \$ _____ Cash or Check (Ck# _____)

For _____

Received by _____