



Kiwanis®

New-member information form

Full name _____ Nickname _____ Gender _____

Home address _____
City _____ State/Province _____ Zip/Postal code _____

Home phone _____ Spouse/Partner name _____

Company name _____ Title _____

Business address _____
City _____ State/Province _____ Zip/Postal Code _____

Business phone _____ Fax number _____ Email address _____

Send Kiwanis mail to: Home ☐ Work ☐

If you are a former Kiwanian: Club name _____ Date left (mo/day/yr) _____

Length of membership _____ If you are a life member, life member # _____

Date of birth: _____
(mo/day/yr)

I accept this application for membership and 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 U.S., US \$8 of a member's annual dues and fees is applied to a Kiwanis magazine subscription.

Committee preference

- ☐ Club administration
☐ Community service

Date: _____ Applicant signature: _____
(mo/day/yr)

CHECK ONE BLOCK PER CATEGORY			
PRIMARY EMPLOYMENT		JOB CLASSIFICATION	EDUCATION ATTAINED
Codes		Codes	Codes
1 ☐ Banking/Finance	17 ☐ Medical	N. ☐ Elected	A. ☐ Grade School
3 ☐ Communic/Media	19 ☐ Nonprofit	O. ☐ Management	B. ☐ High School
5 ☐ Construction	21 ☐ Real Estate	P. ☐ Partner/Owner	C. ☐ Tech. Business School
7 ☐ Education	23 ☐ Religion	Q. ☐ Professional	D. ☐ Assoc. Degree (2 yrs.)
9 ☐ Government	25 ☐ Retail	R. ☐ Sales	E. ☐ Baccalaureate Degree (4 yrs.)
11 ☐ Legal	27 ☐ Transportation	S. ☐ Supervision	F. ☐ Master's Degree
13 ☐ Manufact.(Heavy)	29 ☐ Wholesale	T. ☐ Technical	G. ☐ Grad. Prof. Degree
15 ☐ Manufact.(Light)	94 ☐ Other	V. ☐ Retired	
		X. ☐ Other	

Note: For membership statistics only. Kiwanis International does not provide its membership information to third parties.

Receipt

Date _____
(mo/day/yr)

Received of _____ \$ _____ ☐ Cash or ☐ Check

For _____

Received by _____

New-member sponsor

To the Board of Directors of the Kiwanis Club of _____,

I take pride in proposing _____,

as an active member of the club and have confidence that this individual will become a valuable member.

Date: _____ Sponsor name: _____
(mo/day/yr)

Sponsor signature: _____ Additional club member: _____

Recommended by membership committee

Date: _____ Chairman signature: _____
(mo/day/yr)

Elected to membership by Board of Directors

Date: _____ Secretary signature: _____
(mo/day/yr)