

NEW MEMBER INFORMATION FORM

To help us support you, please provide the information below. We have clubs for every age and ability, but to become a member of Kiwanis you must be the legal age of adulthood in the state or country where the club is located.

Member type*

- New Kiwanis member Former Kiwanis member Current Kiwanis member Transferring Kiwanis member
 Honorary Kiwanis member Corporate Kiwanis member Former Service Leadership Program member

Former name (returning member whose name has changed) _____

Why do you want to join? (check all that apply)

- To help kids Community involvement Business networking To make friends Leadership skills
 Other _____

Sponsor name(s) _____

Contact information

Prefix: Mr. Mrs. Ms. Dr. Rev. None Other _____

Full legal name* _____ Preferred _____
LAST/FAMILY FIRST/GIVEN MIDDLE

Preferred mailing address* _____
STREET

_____ home work
CITY STATE/PROVINCE POSTAL CODE

Phone _____ home work cell

Email _____ home work

Background information

Spouse/Partner name _____

Number of children at home ages: 0-5 _____ 6-12 _____ 12-15 _____ 15-18 _____ 19-21 _____

Birthday MO./DAY/YEAR _____ Gender _____ Date joining club* _____

Languages spoken _____

Corporate boards or community groups you serve with or on _____

Philanthropic interests or charities you donate to _____

Hobbies you enjoy _____

*REQUIRED

Primary employment (check one, most recent employment if unemployed or retired)

- | | | |
|--|--|---|
| <input type="checkbox"/> Agriculture/Forestry/Fishing | <input type="checkbox"/> Banking/Finance/Insurance | <input type="checkbox"/> Communications/Media/Marketing |
| <input type="checkbox"/> Construction/Extraction | <input type="checkbox"/> Education/Training | <input type="checkbox"/> Government/Public Administration |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Legal | <input type="checkbox"/> Hospitality/Food services |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Non-Profit | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Real Estate/Property Management | <input type="checkbox"/> Religion | <input type="checkbox"/> Science |
| <input type="checkbox"/> Transportation/Warehousing | <input type="checkbox"/> Wholesale/Retail | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> IT/Tech | <input type="checkbox"/> Funeral/Death services | _____ |

Name of current employer (most recent employer if unemployed or retired) _____

Dues breakdown

Item	Oct-Nov New Member	Spouse/ Multi- Club New Member	On-Going Member	Spouse	Multi-Club Member	Life Time Member
Ki Dues (KI=52 FD=30 Conv=60/26)	\$84	\$84	\$84	\$84	\$84	\$30
Ki Insurance (fixed by KI)	\$17	\$17	\$17	\$17	\$17	\$17
Ki Magazine (fixed by KI)	\$8	\$0	\$8	\$0	\$0	\$8
Club Member admin	\$78	\$78	\$3	\$1	\$0	\$0
Conference Support (450/30)	\$15	\$15	\$15	\$15	\$10	\$15
District Foundation Support (6)	\$6	\$6	\$6	\$6	\$6	\$6
KI Foundation Support (6)	\$6	\$6	\$6	\$6	\$6	\$6
Division/Lt Gov. Foundation Support (6)	\$6	\$6	\$6	\$6	\$6	\$6
Awards/Speaker Gifts/Sunshine (0/26)	\$0	\$0	\$0	\$0	\$0	\$0
Administrative/Printing/Misc (450/30)	\$15	\$15	\$15	\$15	\$5	\$5
Total	\$235	\$227	\$160	\$150	\$134	\$93

Join Date	FD & KI Mid Year	Mid-Year New Member
December	\$75	\$180
January	\$75	\$170
February	\$75	\$159
March	\$75	\$149
April	\$75	\$138
May	\$75	\$128
June	\$75	\$117
July	\$75	\$107
August	\$75	\$96
September	\$75	\$86

For Spouse/Multi subtract \$8

By completing this application for membership, I 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 United States, US\$8 of a member's annual dues and fees is applied to a Kiwanis magazine subscription. Additional membership dues and fees will be charged.

Signature* _____ Date _____

Thanks and welcome!



*REQUIRED