

New-member information form

Full name	Nickr	name	Gender
Date of birthSpouse/	Partner name	Anniversary date	
Primary address			
City	State/Province	Zip/postal Code _	
Preferred phone	cell _ home _ wo	ork Email	
Joining as member corporate member	Company name		
By providing my email address, I recognize that	t I and opting to receiving regular co	mmunication from Kiwanis Interna	ational
Initial	Date		
Member sponsor name			
Club name			
Are you a former Kiwanian? Yes No A	Are you a former K-Kids, Builders Clu	ub, Key Club or CKI Member?	Yes□ No
If yes club name(s)			
In the US, \$8.00 of a member's annual dues a	nd fees are applied to a Kiwanis mag	gazine subscription	
I accept this application for membership and ag as explained to me by my sponsor.	gree to conform to the bylaws of this	club and comply with the obligation	ons of membership
Applicant signature		Date	