

## **New-member information form**

Full name		Nickname	Gende	er	
Home address			Cite	Late / Description	o /Destal es de
Home phone			•	,	p/Postal code
Torric priorie		Spouse, I al	arer name		
Company name_			Гitle		-
Business address					
-			City St	ate/Province Zi	p/Postal Code
3usiness phone		Fax number_		Email address	
	Length of Length	ne	If you are a life me membership and agree to sof membership as explated dues and fees is applied applicant signature:	ember, life member #o conform to the bylaws sined to me by my sponsoto a Kiwanis magazine su	of this club and or. In the U.S., lbscription.
	,	CHECK ONE BI	LOCK PER CATEGORY		$\neg$
	PRIMARY EMPLOYMEN		JOB CLASSIFICATION	EDUCATION ATTAINED	
	Codes  1	17 Medical 19 Nonprofit 21 Real Estate 23 Religion 25 Retail 27 Transportation 29 Wholesale 94 Other	Codes  N.	Codes  A. Grade School  B. High School  C. Tech. Business School  D. Assoc. Degree (2 yrs  E. Baccalaureate Degree (4 yrs.)  F. Master's Degree  G. Grad. Prof. Degree	.)
	Note: For membership statis	tics only. Kiwanis Internatio	nal does not provide its members	ship information to third parties.	
Receipt Received of		Date(mo/da		[	☐ Cash or ☐ Check
For					
			Re	eceived by	

## **New-member sponsor**

	ors of the Kiwanis Club of ing	
	of the club and have confidence that this individual will become a valuable me	
Pate:	Sponsor name:	
ponsor signature:	_Additional club member:	
Recommende	d by membership committee	
	•	
	d by membership committee  Chairman signature:	
vate:(mo/day/yr)	Chairman signature:	
Oate:(mo/day/yr)	•	