

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

Email this completed form to kdfisher8670@gmail.com

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) _____

Job classification (check one)

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Elected | <input type="checkbox"/> Sales | <input type="checkbox"/> Freelance/Contract work |
| <input type="checkbox"/> Professional | <input type="checkbox"/> Retired | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Technical | <input type="checkbox"/> Partner/Owner | _____ |
| <input type="checkbox"/> Management | <input type="checkbox"/> Support/Administrative | _____ |

Highest education attained (check one)

- | | | |
|--|---|--|
| <input type="checkbox"/> Primary/Grade School | <input type="checkbox"/> Secondary/High School | <input type="checkbox"/> Tech/Business School |
| <input type="checkbox"/> Vocational/Trade school | <input type="checkbox"/> Assoc. Degree (2 yrs.) | <input type="checkbox"/> College/University (4 yrs.) |
| <input type="checkbox"/> Masters Degree | <input type="checkbox"/> Graduate/Professional Degree | |

Degree(s) earned _____

Skill sets/Training (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Professional graphic design | <input type="checkbox"/> Videography/Film | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Social media | <input type="checkbox"/> Professional writing/editing |
| <input type="checkbox"/> Strategic planning | <input type="checkbox"/> CPA/Accounting | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Event planning | <input type="checkbox"/> Youth mentoring | <input type="checkbox"/> Political experience |
| <input type="checkbox"/> Grant writing | <input type="checkbox"/> Legal degree | <input type="checkbox"/> Recruitment |

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 _____

Email this completed form to kdfisher8670@gmail.com

Thanks and welcome!



Kiwanis®