



## New Member Application

Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Gender: M F

Home Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Date of Birth (mm/dd/yr) \_\_\_\_\_

Company Name: \_\_\_\_\_ Your Title: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street City State Zip

Business Ph #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Send Kiwanis mail to: Home  Work  Preferred E-mail: \_\_\_\_\_

Spouse/Partner's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Ann Date: \_\_\_\_\_

Do you have hobbies or special skills that may be helpful to the Kiwanis Club? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Club Committee Preference:  Club Administration  Community Service  Either

Former Kiwanian? (Kiwaniis, Key Club, Circle K): Club Name \_\_\_\_\_

Date Left (mo/day/yr): \_\_\_\_\_ Length of Membership: \_\_\_\_\_ years Offices Held: \_\_\_\_\_

If you are a life member please provide your life member # \_\_\_\_\_

*I accept this application for membership and agree to conform to the bylaws of the club and comply with the obligations of membership as explained to me by my sponsor.*

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_  
(mo/day/yr)

**FROM: NEW MEMBER SPONSOR**

**TO:** The Board of Directors of the Kiwanis Clun of Greater Sacramento

I take pride in proposing \_\_\_\_\_  
as an ACTIVE / HONORARY member of the club and have confidence that this individual will  
become a valuable member.

Date: \_\_\_\_\_ Sponsor's Name: \_\_\_\_\_  
(mo/day/yr)

Sponsor's Signature: \_\_\_\_\_

Additional Sponsor's Signature: \_\_\_\_\_

**RECOMMENDED BY MEMBERSHIP COMMITTEE:**

Date: \_\_\_\_\_ Chairman Signature: \_\_\_\_\_  
(mo/day/yr)

**ORIENTATION COMPLETED ON:** Date: \_\_\_\_\_ By \_\_\_\_\_

**ELECTED TO MEMBERSHIP BY BOARD OF DIRECTORS**

\_\_\_\_\_ Secretary Signature: \_\_\_\_\_  
(mo/day/yr)

**MEMBER ACCOMPLISHMENTS:** Total Years of Perfect Attendance \_\_\_\_\_

Offices Held / Awards Received: \_\_\_\_\_

\_\_\_\_\_

PRIMARY EMPLOYMENT	JOB CLASSIFICATION	EDUCATION ATTAINED
<b>Codes</b> 1 <input type="checkbox"/> Banking/Finance 3 <input type="checkbox"/> Comm/Media 5 <input type="checkbox"/> Construction 7 <input type="checkbox"/> Education 9 <input type="checkbox"/> Government 11 <input type="checkbox"/> Legal 13 <input type="checkbox"/> Manufact (Heavy) 15 <input type="checkbox"/> Manufact.(Light)	<b>Codes</b> 17 <input type="checkbox"/> Medical 19 <input type="checkbox"/> Nonprofit 21 <input type="checkbox"/> Real Estate 23 <input type="checkbox"/> Religion 25 <input type="checkbox"/> Retail 27 <input type="checkbox"/> Trans 29 <input type="checkbox"/> Wholesale 94 <input type="checkbox"/> Other	<b>Codes</b> N. <input type="checkbox"/> Elected O. <input type="checkbox"/> Management P. <input type="checkbox"/> Partner/Owner Q. <input type="checkbox"/> Professional R. <input type="checkbox"/> Sales S. <input type="checkbox"/> Supervision T. <input type="checkbox"/> Technical V. <input type="checkbox"/> Retired X. <input type="checkbox"/> Other  A. <input type="checkbox"/> Grade School B. <input type="checkbox"/> High School C. <input type="checkbox"/> Tech. Business School D. <input type="checkbox"/> Assoc. Degree (2 years) E. <input type="checkbox"/> Baccalaureate (Degree (4 years) F. <input type="checkbox"/> Master's Degree G. <input type="checkbox"/> Grad. Prof. Degree  Name of College: _____

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