

BURLINGTON NOON KIWANIS NEW MEMBER APPLICATION (Young children are our priority one!)

Full Name:	Preferred Name:					
Preferred Mailing Address: _						
Date of Birth:	E-mail:					
Primary Phone:	cell/ home/ work Alternate Phone:	cell/home/work				
Spouse/ Partner's Name:						
Immediate Family:						
Status for your Kiwanis badg	ge					
Employer Name:	or Retired check here					
Degree:	/ Institution:					
Kiwanis Sponsor Name	Da	Date:				
If you are being sponsored by a compareligible to name an alternate who may	dividual Corporate: ny or tax-exempt organization you will have the option to b attend in your place. They will be required to pay for the m dues. We will provide badges for both representatives and	e classified as "Corporate" and be eal if you both attend on the same				
Corporate alternate nam	ne:					
	on fee invoices will be directed to the e-ma red alternate email address here:	ail address shown above				

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 U.S. \$8 of a member's annual dues and fees is applied to a Kiwanis magazine subscription.

New Member's Signature: _____

Date:			