



KIWANIS MEMBERSHIP INFORMATION

PLEASE TYPE OR PRINT

KIWANIS CLUB	KEY NUMBER	DISTRICT NAME OR NUMBER	STATE/PROVINCE	COUNTRY
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PLEASE CHECK ONE

- NEW OR FORMER MEMBER ADD
 MEMBER DELETE
 MEMBER TRANSFER
 MEMBER INFORMATION CHANGE
 HONORARY MEMBERSHIP
 NON-MEMBER SUBSCRIPTION

MEMBERSHIP ID NUMBER	KIWANIS LIFE MEMBER YES NO	KIWANIS LIFE MEMBER NUMBER	DISTRICT LIFE MEMBERSHIP YES NO
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MULTIPLE MEMBERSHIP YES NO	IF YES, CLUB NAME	KEY NUMBER	MEMBER ID NUMBER	DATE JOINED (MONTH/DAY/YEAR)
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LAST NAME	SUFFIX	FIRST NAME	MIDDLE INITIAL	PREFIX
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GENDER M F	DATE OF BIRTH	TELEPHONE	PREFERRED EMAIL ADDRESS
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HOME ADDRESS	CITY	STATE/PROVINCE	COUNTRY	ZIP/POSTAL CODE
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BUSINESS NAME	TITLE/POSITION	BUSINESS ADDRESS
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CITY	STATE/PROVINCE	COUNTRY	ZIP/POSTAL CODE	FAX NUMBER	BUSINESS PHONE
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SPOUSE NAME	IS SPOUSE A MEMBER YES NO	IF YES, CLUB NAME	KEY NUMBER	MEMBER ID NUMBER
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SEND KIWANIS MAIL TO: HOME WORK	SPOUSAL MAGAZINE CREDIT YES NO
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PRIMARY EMPLOYMENT Codes

CHECK ONE BLOCK PER CATEGORY

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> 1 Banking/Finance | <input type="checkbox"/> 11 Legal | <input type="checkbox"/> 21 Real Estate | <input type="checkbox"/> 31 Agriculture |
| <input type="checkbox"/> 3 Communications/Media | <input type="checkbox"/> 13 Manufacturing (Heavy) | <input type="checkbox"/> 23 Religion | <input type="checkbox"/> 94 Other _____ |
| <input type="checkbox"/> 5 Construction | <input type="checkbox"/> 15 Manufacturing (Light) | <input type="checkbox"/> 25 Retail | |
| <input type="checkbox"/> 7 Education | <input type="checkbox"/> 17 Medical | <input type="checkbox"/> 27 Transportation | |
| <input type="checkbox"/> 9 Government | <input type="checkbox"/> 19 Nonprofit | <input type="checkbox"/> 29 Wholesale | |

JOB CLASSIFICATION Codes

EDUCATION ATTAINED Codes

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> N Elected | <input type="checkbox"/> S Supervision | <input type="checkbox"/> A Grade School | <input type="checkbox"/> F Master's Degree |
| <input type="checkbox"/> O Management | <input type="checkbox"/> T Technical | <input type="checkbox"/> B High School | <input type="checkbox"/> G Graduate Professional Degree |
| <input type="checkbox"/> P Partner/Owner | <input type="checkbox"/> V Retired | <input type="checkbox"/> C Technical/Business School | <input type="checkbox"/> H College/University Attended |
| <input type="checkbox"/> Q Professional | <input type="checkbox"/> X Other _____ | <input type="checkbox"/> D Associate Degree (2 yrs) | |
| <input type="checkbox"/> R Sales | | <input type="checkbox"/> E Baccalaureate Degree (4 yrs) | |

New member sponsored by:

Name _____ ID Number _____

PLEASE NOTE: FOR MEMBERSHIP STATISTICS ONLY. KIWANIS INTERNATIONAL DOES NOT PROVIDE MEMBERSHIP INFORMATION TO THIRD PARTIES.

If you are a former member Kiwanis Key Club Kiwanis Junior Circle K Aktion Club K-Kids Builders Club

Club Name _____ Former ID Number _____

Date Joined _____ Date Left _____

PLEASE COMPLETE THIS SECTION ONLY IF DELETING A MEMBER

Effective date (MM/DD/YYYY) _____

Check reason for delete - Codes

- A Attendance
 B Business Pressure
 D Deceased
 G Other _____
 H Health
 I Lack of interest
 L Lack of time
 M Moving
 P Non payment of dues

PLEASE COMPLETE THIS SECTION ONLY IF MEMBER IS TRANSFERRING TO ANOTHER KIWANIS CLUB

Effective Date (MM/DD/YYYY) _____ Dues paid through _____ (Date)

Club transferring to - Club Name _____ Key Number _____ District _____

NOTE: PLEASE GIVE ONE COPY OF THIS FORM TO MEMBER TO BE GIVEN TO THE CLUB TO WHICH HE OR SHE IS TRANSFERRING.



MEMBERSHIP INFORMATION PROCESSING INSTRUCTIONS

ALWAYS BE SURE THE FOLLOWING INFORMATION IS COMPLETED AT THE TOP OF EACH FORM:

CLUB NAME, KEY NUMBER, DISTRICT NAME OR NUMBER, STATE/PROVINCE, COUNTRY, AND TYPE OF TRANSACTION BEING SUBMITTED.

Complete and return for the following reasons:

1. New Member Add – Complete all information as requested on form and submit with the appropriate International and district fees. Please contact the district or International office for current fee(s).
2. Honorary membership and nonmember subscriptions – Submit with the appropriate fees: Honorary member: US and Canada, \$10.00 (USD), all others, \$12.00 (USD). Nonmember subscriptions: \$18.00 (USD). Note: an honorary member is only added to Kiwanis International records when accompanied by the appropriate fee as indicated.
3. Deletion – Fill in the member name, ID number, date and reason for deletion. Please indicate the “deceased” date when reporting a deceased member.
4. Change of Address – Fill in the new address, city, state or province, country and zip or postal code and other information.
5. Name Change – Fill in correct spelling of member’s name: last name followed by first name and middle initial.
6. Additions or changes in your membership records as indicated above should be mailed to Kiwanis International, Attn: Member Services, 3636 Woodview Trace, Indianapolis, Indiana 46268 as soon as they occur to avoid delay in delivery of the KIWANIS magazine. Be sure to submit one copy to the district office and maintain one copy for the club’s file.
7. Transfer of membership – Fill in member name, ID number, and information requested in the transfer member section. In the delete section, enter the effective date that the member will be leaving your club. Please give one copy of this form to the member to be given to the club into which he or she is transferring. The club into which he or she is transferring must send in the member information form within 6 months of the transfer for the processing fees to be waived.
8. Do not submit changes in membership status to “senior” status. This is an internal club classification only. The member remains as “active” status in Kiwanis International records.
9. It is very important that the information you are providing is either printed or typed to ensure proper recording.

For further assistance, please call 1-800-KIWANIS (800-549-2647) or 317-875-8755, extension 390.