



# Kiwaniis<sup>®</sup>

CLUB OF SAPULPA, OK

## New Member Application and Information Form

Date: \_\_\_\_\_ Individual application      Corporate application      Transfer

Full name: \_\_\_\_\_ Nickname \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender:    M      F

Home address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Spouse/Partner name \_\_\_\_\_

Company name: \_\_\_\_\_ Title \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone \_\_\_\_\_ Fax number \_\_\_\_\_

How do you prefer to receive Kiwanis Mail?      Home      Work

Name of Member of Kiwanis Club of Sapulpa who is your sponsor: \_\_\_\_\_

*\*\*If you are a former Kiwanian, please fill out the following:*

Club name: \_\_\_\_\_ Date left: \_\_\_\_\_ Length of membership    years \_\_\_\_\_

If you are a life member, please list life member # \_\_\_\_\_

**Applicants must submit a non-refundable application fee of \$50. This fee will be applied to your account upon acceptance into the Kiwanis Club of Sapulpa. All applicants must pass a Criminal Background Check.**

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

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE COMPLETED BY BOARD:**

Membership Committee Approved Committee Chair Initials: _____ Date: _____	Board Approved Secretary Initials: _____ Date: _____	Application Fee Received: Treasurer Initials: _____ Date: _____
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Amount Received: \$ \_\_\_\_\_    Check    Cash