

# KIWANIS CLUB OF ANN ARBOR

## MEMBERSHIP APPLICATION

Full Name: \_\_\_\_\_ Preferred name: \_\_\_\_\_  

Last
First
Middle

Home Address: \_\_\_\_\_  

Street
City
State
Zip(XXXXXX)

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

(xxx) xxx-xxxx
(xxx) xxx-xxxx
(xxx) xxx-xxxx

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: \_\_\_\_\_ Spouse Name: \_\_\_\_\_  

mm dd yyyy

Preferred Email Address: \_\_\_\_\_

If you are a former Kiwanian, name of Club or City? \_\_\_\_\_

Club Name: \_\_\_\_\_ Date left: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Years of Kiwanis Membership: \_\_\_\_\_ If you are a life member, life membership number: \_\_\_\_\_

Other Community Affiliations: \_\_\_\_\_  
 \_\_\_\_\_

Offices held: \_\_\_\_\_ Retired (Y/N): \_\_\_\_\_

Most Recent Employer: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Business Address: \_\_\_\_\_  

Street
City
State
Zip (XXXXXX)

**EMPLOYMENT/PROFESSION (Select one or more with an "x" or if retired, the most recent)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accountant/Actuary                 | <input type="checkbox"/> Engineer                         | <input type="checkbox"/> Real Estate/Broker/Developer |
| <input type="checkbox"/> Agriculture/Landscaping            | <input type="checkbox"/> Executive/Business Owner         | <input type="checkbox"/> Religion/Pastor/Spiritual    |
| <input type="checkbox"/> Automotive                         | <input type="checkbox"/> Food/Entertainment/Hospitality   | <input type="checkbox"/> Research/Scientist           |
| <input type="checkbox"/> Banking/Finance/Investment         | <input type="checkbox"/> Government                       | <input type="checkbox"/> Sales/Retail or Wholesale    |
| <input type="checkbox"/> Business/Office Administration     | <input type="checkbox"/> Insurance/Account Exec           | <input type="checkbox"/> Service Provider             |
| <input type="checkbox"/> Communication/Media/PR             | <input type="checkbox"/> Judicial/Court                   | <input type="checkbox"/> Skilled Trades _____         |
| <input type="checkbox"/> Construction/Building/Architecture | <input type="checkbox"/> Law Enforcement                  | <input type="checkbox"/> Social Worker                |
| <input type="checkbox"/> Consultant                         | <input type="checkbox"/> Legal/Attorney/Paralegal         | <input type="checkbox"/> Technology                   |
| <input type="checkbox"/> Dentistry                          | <input type="checkbox"/> Manufacturing                    | <input type="checkbox"/> Transportation               |
| <input type="checkbox"/> Designer                           | <input type="checkbox"/> Medical/Physician/Nurse/Tech     | <input type="checkbox"/> Utilities                    |
| <input type="checkbox"/> Education/Higher                   | <input type="checkbox"/> Non-profit/Service Agencies      | <input type="checkbox"/> Veterinarian                 |
| <input type="checkbox"/> Education/pre K-12                 | <input type="checkbox"/> Psychologist/Therapist/Counselor | <input type="checkbox"/> Other: _____                 |

**I submit this application for membership and agree to conform to the Club Bylaws and to comply with the obligations of membership as explained by my sponsor.**

Applicant signature (Type in your name): \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  

mm
dd
yyyy

**Note:** Kiwanis International does not provide its membership information to third parties.

When this page is completed, save to your computer and email completed form to: [clubsecretary@a2kiwanis.org](mailto:clubsecretary@a2kiwanis.org)  
 Secretary, Kiwanis Club of Ann Arbor  
 100 N. Staebler Rd. Suite-C  
 Ann Arbor, MI 48103

# KIWANIS CLUB OF ANN ARBOR

## MEMBERSHIP APPLICATION

(This Page to be Completed by Club Administration and Club Secretary)

**From: Sponsor/Co-Sponsor**

**To: Board of Directors of Kiwanis Club of Ann Arbor,**

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**We take pride in proposing:**

\_\_\_\_\_ as an active member of the Club  
Print Name

We are confident that this applicant will become a valuable member.

Sponsor: \_\_\_\_\_  
Print Name Signature

Co-Sponsor: \_\_\_\_\_  
Print Name Signature

**Assignment of Past President Interviewer:**

Past President: \_\_\_\_\_ Date Assigned: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Print Name

**Result of Past President Interview:**

On behalf of the Membership, Growth and Education Committee, \_\_\_\_ I Recommend: \_\_\_\_ Do Not Recommend  
that this applicant be accepted for membership in the Club.

Past President's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Approved by the Board of Directors and Elected to Membership Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Secretary's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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Secretary, Kiwanis Club of Ann Arbor  
100 N. Staebler Rd. Suite-C  
Ann Arbor, MI 48103