



**OLYMPIA KIWANIS CLUB**  
 P. O. BOX 1847 OLYMPIA WA 98507-1847  
 Web site: olympiakiwanis.org

**KIWANIS CLUB OF OLYMPIA MEMBERSHIP APPLICATION FORM**

Name:		Date of Birth:	
Home Phone		Spouse Name	
Cell Phone		e-mail address	
Mailing Address		City/State/Zip	
Employer:		Employer Address	
Position/Title		Work Phone	
Former Kiwanis Club Member at:		Date Left:	
Length of Membership		If life member, number?	

Please check your area(s) of interest. Below are Olympia Kiwanis committees/programs:

Membership Growth/Education	Communications – website, newsletter, publicity
Youth Services	Sponsored Youth Clubs
Scholarship Endowment	Program Committee
House Reception and Club Meetings	Major Emphasis
Community Services	Human and Spiritual Values
Inter-Club Relations	Risk Management
Internal Audit	Fundraising
Gardens or Firewood Projects	Law Enforcement Youth Camp

Your sponsor will tell you about each committee's function and responsibility.

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

DATE: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

**New Member Sponsor**

I \_\_\_\_\_ take pride in proposing \_\_\_\_\_ for membership to the Kiwanis Club of Olympia.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Membership Committee Recommendation: \_\_\_\_\_ Date: \_\_\_\_\_

Board of Directors Decision: \_\_\_\_\_ Date: \_\_\_\_\_