

KIWANIS CLUB OF CAREFREE, ARIZONA

P.O. Box 1498, Carefree, Arizona 85377

Membership Application Form

Please fill form completely – Please print clearly

PREFIX	FIRST NAME	MIDDLE INITIAL	LAST NAME	SUFFIX
DATE OF BIRTH	CELL PHONE	HOME PHONE	EMAIL ADDRESS	
MAILING ADDRESS		CITY	STATE/PROVINCE	ZIP/POSTAL CODE
BUSINESS NAME		TITLE/POSITION	BUSINESS ADDRESS (CITY ONLY)	

Tell us about your Highest Degree/Specialty Interests/Skills in School (3-5 sentences) *

Tell us about your Career (3-5 sentences) *

Are you being sponsored by a current member? ☐ Yes ☐ No

If so, by whom:

Previous Volunteering Experience (3-5 sentences) *

How many hours per month would you commit to volunteer?

Community Service - Select ALL Areas of Interest

- | | |
|--|---|
| <input type="checkbox"/> Service Leadership Programs | <input type="checkbox"/> K-Kids (Elementary School) |
| <input type="checkbox"/> Key Club (High School) | <input type="checkbox"/> Terrific Kids Program |
| <input type="checkbox"/> Builders Club (Middle School) | <input type="checkbox"/> B.U.G. Program (Bring Up Grades) |
| <input type="checkbox"/> Aktion Club (Special Needs Youth) | |

Fundraisers - Select up to Three

☐ Pancake Breakfast

☐ Kiwanis Marketplace

☐ Other Special Event

Club/Foundation Committees & Focused Interests

<input type="checkbox"/> Kiwanis Marketplace	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Budget/Finance
<input type="checkbox"/> Programs/Speakers	<input type="checkbox"/> Lunch Meeting Setup	<input type="checkbox"/> Membership
<input type="checkbox"/> Funds Request	<input type="checkbox"/> Scholarship	<input type="checkbox"/> Fundraising Events
<input type="checkbox"/> Schools & Education	<input type="checkbox"/> Communications, Social Media & Website	<input type="checkbox"/> Marketplace Property & Building Maintenance
<input type="checkbox"/> Accountability		

Carefree Kiwanis Club Costs (Quarterly bills are due upon receipt)

- **One Time Administrative Fee** \$125
- **Quarterly Dues** (prorated for first quarter) \$65.00 (or \$260 Annually)
- **Meeting Lunches** (price subject to change) \$15.00/lunch (Pay at lunch with credit card or cash)

Applicant Signature: _____

Date: _____

Kiwanis Membership Applicants

- Please complete entire application and sign
- Submit completed application and check to your Member Sponsor, Membership Chairman, or Kiwanis Office
Kiwanis Club of Carefree
P.O. Box 1498
Carefree, AZ 85377

Bob Moore
Membership Committee Chairperson
ramco4032@gmail.com
(480) 703-2421

Application Reviewed

By: _____

Date: _____

