

## Tuscola Kiwanis Club - New Membership Application

Full Name		Nickname _		Gender
Home Address				
Home Phone	Street	City Spouse/Partner Name	State	1
Company Name				
Business Address	Street	City	State	Zip
Business Phone		•		•
By providing my e-mail address, I op	ot in to receive Kiwanis Into	ernational information. Send	Kiwanis mail to Home	Work
If you are a former Kiwanian: Club	Name		Date Left (mo./e	day/yr.)
Leng	gth of Membership	If you are a l	ife member, enter "Life"	
Type of Membership P	ersonal Corp	orate		
Date of Birth (mo./day/yr.)  I accept this application for		conform to the bylaws of this	s club and comply with th	e obligations of membership as
explained to me by my spo		·		
Date(mo./day/yr.)	Applicant Si	gnature		
Committee Preference: Clu	b Administration	Community Service		
Enclose first dues paymen	<u>t</u> :			
Prorated New Member Due	•	•		
New Member Sponsor:				
To the Board of Directors of	f the Kiwanis Club of	of Tuscola Illinois,		
I take pride in proposing have confidence that this inc	dividual will become	e a valuable member.	as an active r	member of the club and
Date	Sponsor Nam	ne Printed:		
Sponsor Signature:				
Date:				

CCDIDT			
ECEIPT	(r	mo./day/yr.)	
ceived of			Cash or Check
	Received by		
ected to Membership	by Board of Directors:		
ate	Secretary Signature:		
(mo/day/yr)	_ Secretary Signature		

## **New Member Dues Schedule:**

Join Month	Paid to Club
October	\$150.00
November	\$138.00
December	\$125.00
January	\$113.00
February	\$100.00
March	\$88.00
April	\$75.00
May	\$63.00
June	\$50.00
July*	\$188.00
August*	\$175.00
September*	\$163.00

<sup>\*</sup>Includes next year's dues of \$150.00. Kiwanis Fiscal Year Oct 1 to Sept 30

**EFFECTIVE 10-1-2024**