APPLICATION FOR LIFE MEMBER STATUS

Application is hereby made for the granting of Life Member status to a member in good standing for the:

Kiwanis Club of _____ Key number _____

Division _____ District _____

State or province _____ Country _____

Applicant name *(Spelled as it should appear on mementos)* _____

Kiwanis Member ID Number _____

Date of entry into Kiwanis, if available, or approximate number of years of membership (three-year minimum required) _____

Kiwanis history of the applicant (offices held in club, division, district and any other Kiwanis clubs in which the applicant has held membership) _____

_____

_____

Certification of approval (one signature required):

_____ _____

District governor or district secretary *Club president or club secretary*

DELIVER LIFE MEMBER MEMENTOS TO:

Club president or secretary name _____

Address (not P.O. Box) _____ City _____

State/province _____ Country _____ Postal code _____

Telephone *(Requested by carrier)* _____

Presentation date ***(Please allow four weeks for processing and delivery.)*** _____

☐ **CHECK ENCLOSED.** US$1,155 for Tier 1 / US$510 for Tier 2

☐ **CREDIT CARD INFORMATION:** ☐ American Express ☐ Mastercard ☐ Visa

#_____ Expiration date _____

Name of card holder_____ Phone number _____

FOR OFFICE USE ONLY: KI-17760-52002250

Date received _____ Life Member status number _____

Kiwanis®