



CLUB PRESIDENT & SECRETARY CHANGE FORM (Please complete all fields)

Kiwanis Club of	Key Number	District Name or Number Texas-Oklahoma	State/ Province Texas	Country USA
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Please Check one:
 New President New Secretary Change in Club President Information Change in Club Secretary Information

Membership ID Number	Division Number	Name of Club Officer replacing:
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Send Kiwanis Mail to: Home Work **DIVISION #** _____

Last Name		First Name		Suffix	CHECK ONE SPACE PER CATAGORY		Middle Initial	Prefix
Gender __ M __ F	Date of Birth	Home Phone		Preferred E-mail Address				
Home Address			City		State/ Province	Country USA	Zip Code	
Business Phone			Title/Position		Business Address			
City			State/ Province	Country USA	Zip Code	Fax Number		Business Number
Spouse Name		Is Spouse a Member __ Yes __ No		If Yes, Club Name:		Key Number	Member ID Number	

Primary Employment Codes __ 1 Banking/ Finance __ 11 Legal __ 21 Real Estate __ 31 Agriculture __ 3 Communications/ Media __ 13 Manufacturing (Heavy) __ 23 Religion __ 94 Other _____ __ 5 Construction __ 15 Manufacturing (Light) __ 25 Retail _____ __ 7 Education __ 17 Medical __ 27 Transportation __ 9 Government __ 19 Nonprofit __ 29 Wholesale						Spousal Magazine Credit __ Yes __ No	
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Job Classification __ N Elected __ S Supervision __ O Management __ T Technical __ P Partner/ Ownership __ V Retired __ Q Professional __ X Other __ R Sales		Education Attained Codes __ A Grade School __ F Master's Degree __ B High School __ G Graduate Professional Degree __ C Technical/ Business School __ D Associate Degree (2 years) __ E Baccalaureate Degree (4 yrs)	
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College/ University Attended _____ Other Affiliations _____

Offices/ Positions Held (if any) _____
 Please Note: For membership statistics only Kiwanis International does not provide membership information to third parties.

If you are a former member Kiwanis Key Club Kiwanis Junior Circle K Aktion Club K-Kids Builders

Club Name _____ Former ID Number _____ Date Joined _____ Date Left _____

Please complete this section only if deleting a member

Effective Date (MM/DD/YY) _____	Check Reason for delete – Codes
__ A Attendance __ B Business Pressure __ D Deceased __ G Other _____	
__ H Health __ I Lack of Interest __ L Lack of Time __ M Moving	

Please complete this section only if member is transferring to another Kiwanis Club

Effective Date (MM/DD/YY) _____ Dues Paid Through _____

Club transferring to – Club Name _____ Key Number _____ District _____

Note: Please give one copy of this form to member to be given to the club to which he or she is transferring.

EMAIL to TX-OK District @ txokdist@swbell.net and Kiwanis Intl @ memberservices@kiwanis.org OR
 Mail to TX-OK District, 624 Six Flags Dr, Ste 265, Arlington, TX 76011 and Kiwanis Intl, 3636 Woodview Trace, Indianapolis, IN 46268-3196 OR
 Fax to TX-OK District 817-649-1905 and Kiwanis Intl 317-879-0204