



THE KIWICLUB MEMBERSHIP APPLICATION FORM

Name: _____ Date: _____
First Last Name When Hired Current Last Name

Address: _____
Street Apt. City State Zip

Phone: _____ Email: _____
Home Cell Alternative

Airline Affiliation if other than AA: _____
USAir TWA America West TransCaribbean Reno Air American Eagle AE Envoy

Did you retire from AA: Yes ___ No ___ If so, year retired: _____

Graduation Year/Class No.: _____ Birthdate (*year optional*): _____

Have you been a member of The Kiwi Club in the past? Yes ___ No ___ If yes, list chapter affiliation. If you were a member of more than one chapter, list all. _____

Would you like information about a chapter? If so, click on the [Membership](#) link, [How to Join](#) and [Chapter Map](#) link to find the chapter(s) you are interested in and list here: _____

Print Name _____ Phone # _____

Signature _____

Please include an emergency contact: _____
Name Phone

Please include your check in the amount of \$50.00 (US currency), made payable to The Kiwi Club with your application. This amount covers the current two-year term. Mail your check to the sitting National Treasurer (see list of National Officers on the top of the [Forms page](#) for contact information).

MAIL THIS APPLICATION AND YOUR CHECK TO THE NATIONAL TREASURER