



THE KIWICLUB GIFT MEMBERSHIP FORM

If you would like to gift a membership in The Kiwi Club to someone who is qualified, please complete the form below. *If you wish to remain anonymous*, please be sure you indicate your wishes, otherwise, the recipient of your gift will be given your name as the donor.

After receiving notification of your gift, the recipient(s) will be advised of membership status and will be given a list of chapters if indicated on the form. Once she/he becomes a paid member of The Kiwi Club, she/he will be eligible to receive all Kiwi mailings and will be given the password for access to the Club's official website. Additionally, the recipient will be eligible to attend national conventions and any official events of The Kiwi Club.

If the recipient chooses to join a chapter, she/he will be responsible for paying applicable chapter dues unless the donor wishes to pay those dues. If the donor is paying chapter dues, she/he will be responsible for contacting the chapter for information on paying chapter dues and for paying the stated amount *directly* to the chapter. After receiving chapter dues, the chapter is responsible for sending all pertinent information on the new member to the National Treasurer. If this information is not sent to the national Treasurer, the new member will be classified as a member at large.

Once the Gift Membership Form is completed, please forward it and a check in the amount of \$50 (U.S. currency) to the National Treasurer. Any charges incurred for returned checks are the responsibility of the donor and will not be paid by The Kiwi Club.

(See list of National Officers at the top of the Forms page for contact information).

GIFT MEMBERSHIP TO:

Name: _____
First Last Name When Hired Current Last Name

Address: _____
Street/Apt. - City - State Zip

Phone: _____ E-mail: _____

Airline Affiliation: _____ Class/Year: _____

Send information on chapters to recipient: Or will recipient be a Member at Large?
Yes No Yes No

GIFT MEMBERSHIP DONOR:

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

Address: _____
Street Apt. City State Zip

Phone: _____ E-mail: _____ Your Chapter: _____

I wish to remain anonymous:
Yes No

**SEND YOUR CHECK IN THE AMOUNT OF \$50.00 (U.S. CURRENCY)
MADE PAYABLE TO THE KIWICLUB TO THE NATIONAL TREASURER.**