



Lincoln Center Kiwanis Club

Request for Membership Assistance Form

Name: _____

Phone Number: _____

E-mail Address: _____

In order to be considered you will need to be actively involved in a committee and a fund raiser in order to qualify.

Committee: _____

Fund Raiser: _____

Explain your involvement: _____

Please complete and return form to Linda Helzer. Request will be reviewed for approval and availability of funds. (maximum of \$60.00 per member)

If you should have any questions please contact Linda Helzer or Membership Committee Chairperson/Vice President. (Secretary-Linda Helzer, Treasurer-Gary Muckel and the Vice President are the only individuals who will have access to this information) Applicants and their information will be kept confidential.

Member Signature: _____ Date: _____

Membership Committee Chairperson/V.P. Signature: _____

Date: _____ Approval Amount \$ _____