

KIWIN'S Membership Application

Name: _____

Grade: _____

SN: _____

Email: _____

Home #: _____

Cellphone #: _____

Address: _____

Membership fee \$15.00

** If you attended a summer project, see
Christina Vu (Treasurer) for your
reward! **

You **MUST** turn a Soap form with this
application. Soap forms are found online at
www.lqkiwins.org/resources.html

Membership deadline **OCTOBER 2!!**