

# KEY CLUB

## SOUTHWEST DISTRICT KEY CLUB 2019-2020 Officer Certification Form

Key Club: \_\_\_\_\_ Division: \_\_\_\_\_

School Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Faculty Advisor Name: \_\_\_\_\_ Advisor Phone: \_\_\_\_\_

Faculty Email: \_\_\_\_\_ School Phone: \_\_\_\_\_

Sponsoring Kiwanis: \_\_\_\_\_ Kiwanis Division No. \_\_\_\_\_  
Email: \_\_\_\_\_ Phone No. \_\_\_\_\_

**PRESIDENT: Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**VICE PRESIDENT: Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**SECRETARY: Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

# KEY CLUB

**TREASURER: Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

Does your club have a website?  
The Southwest District Key Club would like to see!  
(Optional)

**WEB MASTER: Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

## Website:

Can we link your website to the Southwest District Key Club Website? Yes No

If yes, the Faculty Advisor must sign this form giving the Southwest District Key Club permission to link the club site to the district website.

Faculty Advisor's Printed Name: \_\_\_\_\_

Faculty Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_