

The Official Key Club Election Report Form

New York District 2009 - 2010

Key Club of: _____ Division #: _____

School Address: _____ City: _____ Zip: _____

Telephone: (____) _____ Sponsoring Kiwanis: _____

PRESIDENT'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

VICE PRESIDENT'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

SECRETARY'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

TREASURER'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

BULLETIN EDITOR'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

WEBMASTER'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

FACULTY ADVISOR'S NAME: _____

Address: _____ City: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

Send Form To:

District Administrator Mr. Andrew Lowenberg

P.O. Box 8
Sayville, NY 11782

Secretary Steff Springer

133 Pennsylvania Avenue
Medford, NY 11763