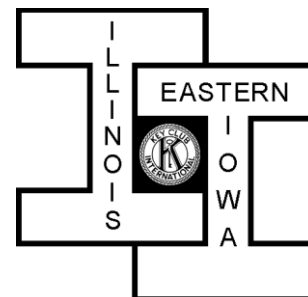


Illinois-Eastern Iowa Key Club District Roster Form

2010-2011

Please fill out this entire form. If there are certain items that do not apply to your club, indicate that it is not applicable (N/A) in the blank. When requested, please list an address for each advisor and officer that is not the same as the school address. Failure to do so may postpone or prevent the delivery of important mailings! Please also include an e-mail address for each advisor and officer; our district is working to utilize all technology to the fullest. We will use e-mail whenever possible. After completing this form, please make **three** copies. Send the original to your District Secretary, one copy to Key Club International, and one copy to your Lieutenant Governor. Don't forget to keep an extra copy for your club records, as well! The deadline for the Rosters In On Time (R.I.O.T.) award is **September 10, 2010**. Your promptness in submitting this roster is greatly appreciated! Thanks!



Division: _____

Website: _____

School Name: _____

Telephone: _____

Address: _____

Charter Date: _____

Sponsoring Kiwanis Club(s): _____

Fax: _____

Project Description

To further enhance the District Guide, the Guide will include a section listing past successful service projects. It is important for the Mighty I-I District to exchange service project and fundraising ideas! The list of projects included in the District Guide will serve as a resource for Key Clubs to implement new project ideas, not only to improve community service, but also to increase volunteer opportunities. Please describe the project your club finds most successful; you are welcome to include more than one project. The more the better! Thank you!

Project Title: _____

Description: _____

Send Original To:

District Secretary
Tanner Oetjen
1841 Hardy St
Murphysboro, IL 62966

Send One Copy To:

Key Club International
3636 Woodview Trace
Indianapolis, IN 46268

Send One Copy To:

Your Lieutenant
Governor

Save one copy for
your club files!

Officer Contact Information

Write on the back if necessary

Faculty Advisor

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

President

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Vice President

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Secretary

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Treasurer

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Statistical Secretary

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Kiwanis Advisor

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____

Other

Name: _____

Address: _____

City/St/Zip: _____

Telephone: _____

E-mail: _____