

# KEY SOLUTIONS

## KEY CLUB MEMBERSHIP RESOURCES

### Club Committee Chairperson Report

Committee: \_\_\_\_\_ Date: \_\_\_\_\_

#### Continuing Activities

Name of Activity: \_\_\_\_\_ Hours completed: \_\_\_\_\_

Activity Evaluation/Updates: \_\_\_\_\_

Name of Activity: \_\_\_\_\_ Hours completed: \_\_\_\_\_

Activity Evaluation/Updates: \_\_\_\_\_

#### New Activities

Name of Activity: \_\_\_\_\_

Finances: \_\_\_\_\_ Projected work hours: \_\_\_\_\_

Description of Activity: \_\_\_\_\_

Assistance needed from other committees/officers: \_\_\_\_\_

Name of Activity: \_\_\_\_\_

Finances: \_\_\_\_\_ Projected work hours: \_\_\_\_\_

Description of Activity: \_\_\_\_\_

Assistance needed from other committees/officers: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

Chairperson Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

a Kiwanis-family member  
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