	Rotary Club of Monroe 1205 North 18th Street, Suite 101A Monroe, Louisiana 71201 • 318.322.9502	MEMBERSHIP APPLICATION Applicant's Sponsor			
	rotarymonroe@bayou.com		Name	Phone	
	www.monroerotary.org	Applicant's Sponsor_	Name	Phone	
APPLICAN	Т				
Title:	First Name:	Last Name:		Suffix:	
Referred/Nickname (Badge):		Date of Birth:		Gender:	
Email:		_ Cell Phone:	Home I	Phone:	
Home Address:					
City:		State:		Zip:	
Mailing Address	(if different than home):				
City:		State:		Zip:	
BUSINESS .	AFFILIATION				
Company Name:	:				
Position (Job Tit	le):	Email:			
Office Phone:		Fax Number:			
Address/Locatio	n:				
City:		State:		Zip:	
Mailing Address	(if different than location):				
City:		Sta	te:	Zip:	
APPLICAN	T'S BIO/BACKGROUND				
	n: (i.e., personal and professional background	l)			
Degrees:					
Hobbies & Intere	est: (i.e., golf, fishing and hunting)				
Community Lead	dership & Other Comments: (<i>i.e., communit</i>	ty organizations you are in	nvolved with board	d member, volunteer, etc.)	

PREVIOUS ROTA	ARY CLUB(S)			
1. Club No.:	Club Name	e:		
City:	State:	Date Joined:	Date Resigned:	
Club Email:				
Officer Positions:			Paul Harris: 🗆 Sustainer	□ Fellow
2. Club No.:	Club Name	e:		
City:	State:	Date Joined:	Date Resigned:	
Club Email:				
Officer Positions:			Paul Harris: □Sustainer	□ Fellow
3. Club No.:	Club Name	e:		
City:	State:	Date Joined:	Date Resigned:	
Club Email:				
Officer Positions:			Paul Harris: □Sustainer	□ Fellow
FAMILY SPOUSE	/DA DTNED			
		L A Norma		•
		Last Name:		
		_ Date of Birth:		
Married: □Yes □No	Anniversary Date:	Is Sp	ouse / Partner a Rotarian?]Yes 🗆 No
	FOF	R OFFICE USE ONLY		