Membership Application

Please complete the information requested below. After completing this form, you can SAVE it in your computer; PRINT it, or E-mail it as an Attachment.

Name:		
Spouse's name:		
Personal Email:		Work Email:
Preferred e-mail address:	Personal	Business
Cell Phone:	Home Phone:	Bus. Phone:
Home Address:		
Job title/Occupation:		
Business Name:		
Business Address:		
Were you a Rotarian previously (if so, when & where)?		
Activities that would enhance consideration as a Rotarian:		
Proposed Member's Signat	ure	Date
Action on Proposal: Received by secretary:		Date of Membership:
eceived by secretary: ubmitted to membership committee:		Classification:
Submitted to board:		Mentor:
Proposed to club:		The Rotarian Subscription:
Approved: Declin	ed:	Proposed for Membership By:
Entered into Member Access:		