

MEMBERSHIP APPLICATION FORM

Proposal for Membership of Rotary Club of Ashland KY

Name:
Home Address:
Home Telephone: Mobile:
Business/Employer Name:
Position Title or Description:
Business Address:
Business Telephone: Fax:
Email:
Date of Birth:
Partner's Name
Children's Names (and their ages if under 18)
Previous Rotary Club (if applicable):
Some vocational and personal background details that will enhance your activities as a Rotarian:
I hereby certify that if accepted to Membership of the Rotary Club of Ashland, KY, that I as a Rotarian, will exemplify the Object of Rotary in all my daily contacts and will abide by the constitutional documents of Rotary International and the club. I agree to pay an admission fee and dues in accordance with the bylaws of the club.
Signature: Date:
Proposed Member Nominated by:
Board Approval on: