

# MEMBERSHIP INFORMATION



## GENERAL INFO

\*Email Address: (w) \_\_\_\_\_ (h) \_\_\_\_\_

\*First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Date of Birth: \_\_\_/\_\_\_/\_\_\_ \*Relationship: \_\_\_ Single: \_\_\_ Married: \_\_\_ Widowed:  
MM DD YR

\*Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \* State: \_\_\_\_\_ \* Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
(Allow Text Messaging ) \_\_\_\_\_ Y \_\_\_\_\_ N Cell Provider: \_\_\_\_\_

Fax: \_\_\_\_\_ Pager: \_\_\_\_\_

## PERSONAL INFO

Place of Worship: \_\_\_\_\_

High School Grad Year: \_\_\_\_\_

Education: \_\_\_\_\_

Jobs: \_\_\_\_\_

Honors: \_\_\_\_\_

## FAMILY

Spouse: \_\_\_\_\_ Anniversary: \_\_\_/\_\_\_/\_\_\_  
MM DD YR

Children: \_\_\_\_\_

## WORK

\*Company: \_\_\_\_\_

\*Company Address: \_\_\_\_\_

\*Job Title: \_\_\_\_\_

\*Job Description: \_\_\_\_\_

\*Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

## ACCOUNT

Proposed Date: \_\_\_\_\_ Proposed By: \_\_\_\_\_

Joined Date: \_\_\_\_\_

to: \_\_\_\_\_ Home \_\_\_\_\_ Work \* Send Emails To: \_\_\_\_\_ Home \_\_\_\_\_ Work

If Former Rotarian: Paul Harris Fellow: \_\_\_\_\_ Office Held \_\_\_\_\_

Photo: \_\_\_\_\_ Submitted \_\_\_\_\_ To Be Taken \_\_\_\_\_

\* **REQUIRED FIELDS**

**Part B (to be completed by proposed member after Board Approval)**

I hereby certify that I am qualified for active membership by my current or former status as a business, professional, or community leader, or as a Rotary Foundation alumnus/a, and by having a place of business or residence within the club's locality or surrounding area.

I understand that, if accepted for membership, it will be my duty to exemplify the Object of Rotary in all my daily contacts and activities and to abide by the constitutional documents of Rotary International and the club. I agree to pay my admission fees required by the club and to pay annual dues in accordance with the club bylaws. If dues are not paid within 90 days, my membership will be terminated. I hereby give permission to the club to publish my name and proposed classification, if applicable to its membership.

Proposed Member's Signatures \_\_\_\_\_

\_\_\_\_\_ Date



**To be completed by a club officer**

Classification: \_\_\_\_\_

If member is a former Rotarian, provide previous club and district information:

Club Name: \_\_\_\_\_

District Number: \_\_\_\_\_

Club ID Number: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_

Rotary Membership ID number: \* \_\_\_\_\_  
\*If unsure of number, contact your Club and District Support representative. Find contact information at [www.rotary.org](http://www.rotary.org).

If an RI program participant or Foundation alumnus/a, program(s) and date(s):  
\_\_\_\_\_  
\_\_\_\_\_

Director assigned to assist with orientation: \_\_\_\_\_  
\_\_\_\_\_

ACTION ON PROPOSAL	DATE
Received by Secretary	_____
Former Rotary club contacted (if former Rotarian)	
<input type="checkbox"/> In good standing <input type="checkbox"/> Not in good standing	
Submitted to Membership Chair:	_____
Submitted to Board:	_____
Board decision received:	
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
Proposed to Club: (10-day letter)	_____
<i>If any objection has been filed, the board should address the issue at its next meeting.</i>	
Final approval by Board:	_____
Rotary Orientation held:	_____
Signed form and admission fee received:	_____
Admitted to Membership:	_____
Entered into Member Access (RI):	_____
Entered into Website:	_____