

P.O. Box 60362  
Savannah, GA 31420



## Membership Application

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

Home Address: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Occupation/Profession \_\_\_\_\_

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

Previous Employment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Education Background \_\_\_\_\_

\_\_\_\_\_

Birthday (Month/Day/Year) \_\_\_\_\_

Former Rotarian: Yes \_\_\_ No \_\_\_ If yes, what was your member # \_\_\_\_\_

Former Club Name/# \_\_\_\_\_ Dates: \_\_\_\_\_

Spouse/Partner Name: \_\_\_\_\_

Wedding Anniversary (Month/Day/Year): \_\_\_\_\_

Activities/Interests which would recommend consideration of you to be a Savannah South Rotarian? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you wish to join Rotary? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Rotarian(s) \_\_\_\_\_

Proposed Classification \_\_\_\_\_