

Rotary Club of Savannah South
Membership Information Form
Complete and Return to the Club Secretary.

PERSONAL DATA

Title: _____ First Name: _____ Middle Name: _____ Last: _____

Preferred Name (to be used on club badge) _____ Gender: Male Female

Date of Birth: ____ / ____ / ____ (mm/dd/yy) Married: Yes No Anniversary Date: ____ / ____ / ____

Spouse/Partner First Name: _____ Last Name: _____

BUSINESS DATA:

Occupation: _____ Retired: Yes

Company name: _____

Honors, Qualifications, Foreign Language Skills: _____

CONTACT DATA:

Please indicate which address to use for all club mailings and contacts: Primary Secondary

Primary Address: Home Office

Mailing Address: _____

City: _____ State _____ Zip _____

Home Phone _____ Mobile Phone: _____

Business Phone _____ Email: _____

Secondary Address: Home Office Summer

Mailing Address: _____

City: _____ State _____ Zip _____

Home Phone _____ Mobile Phone: _____

Business Phone _____ Email: _____

CLUB DATA:

Hobbies, Interests, Special Skills _____

Have you ever been a Rotarian before? Yes No If yes, please continue below.

Previous Rotary Clubs (Name, Year,) _____

Your Rotary ID # from previous club _____

Club achievements: {Paul Harris Fellow, Offices Held, Awards} _____