ROTARY CLUB OF INDIANA- 5229 INDIANA, PA 15701 New Member Proposal Application

Title (ex: Mr., Ms., Mrs., Dr., Rev.):	Suffix (ex: Jr., Sr., III):	
Last Name:	First Name:	
Date of Birth:/		
Home Address:		
Business/Work Address:		
Current (or former) Firm and Position:		
Telephone Numbers: (include Area Code):		
Residence:	Cell:	
Business:		
Email Address:		Personal
Email Address:		Business
Membership Type (check one)	•	
If Active, proposed classification:		
If a transferring or former Rotarian, list previous		
Club Name:	Club Name:	
Dates: FromTo	Dates: From	To
Recent Transfer (one year or less):Y	esNo	
(If an RI program participant or Foundation a	lumnus/a, list programs(s) and date	e(s):
The financial obligation of the Rotary Club of Indiana, dues. District dues, and Rotary International dues as w throughout the year. Any other projects, events, etc., w discretion of the individual member. I hereby certify that I am qualified for (check Active membership – because of my formerly worked or did have or now h surrounding area. Honorary membership – because of	one): current/former position or because ave a place of business or residence	etings. This is billed quarterly ntary and participation is at the sole I am currently working or
I understand that, if accepted for membership, it will be activities and to abide by the constitutional documents the annual dues and meal fees billed quarterly in accompublish my name and proposed classification, if applic	of Rotary International and the Rotary Cludance with the bylaws of the club. I hereby	ıb of Indiana - 5229. I agree to pay
Applicant's Signature:		Date:
Proposer's Signature:		