

Membership Application Form

Application date: _____

Name: _____

Birthday (Mo/Day): _____

Home Address: _____

Business/Employer: _____

Position or Title: _____

Business Address: _____

Preferred phone #: _____ Additional phone #: _____

Preferred email: _____

Spouse/Partner: _____

Birthday (Mo/Day): _____

Anniversary (M/D): _____

To be completed by membership committee

Proposed by: _____ *Date received:* _____

Committee approval: Yes No *If yes, date approved:* _____

Board approval: Yes No *If yes, date approved:* _____

Club approval: Yes No *If yes, date admitted to club:* _____

Date entered into district database: _____

Former Rotarian? Yes No

If yes, name of club(s): _____

If yes, membership dates: _____

Please briefly describe any past or present community involvement:

Any hobbies or interests that you'd like to share?

Please list three personal or business references:

Name: _____

Relationship: _____

Phone #: _____

Name: _____

Relationship: _____

Phone #: _____

Name: _____

Relationship: _____

Phone #: _____