**Rotary Club of Regina Eastview**



P.O. Box 1623

Regina, Saskatchewan

S4P 3C4

“Service Above Self”

**APPLICATION FOR MEMBERSHIP**

Full Name:

Spouse/Partner:

Home Address:

Phone #s: Home:

 Work:

 Cell:

Preferred Email:

Birthday celebrated on:

Profession:

Company/Firm:

 Address:

Please indicate your preferred contact info for Rotary: 🞎 Home 🞎 Work

Facebook: Twitter:

Previous Rotary Membership (Years and Club(s)):

Date Proposed: Proposer:

Board Approved: Date RI notified:

Date Inducted: Date Badge ordered:

Classification:

## Rotary Club of Regina Eastview



**Declaration of Understanding**

In the interests of “Service Above Self” and the Rotary 4-Way Test, the Rotary Club of Regina Eastview wants new Members to succeed in their Rotary Journey. Further to this goal, this Declaration of Understanding will assist new Members with a basic understanding of the expectations that apply to all Rotarians:

(1) Attend at least 50% of the weekly Rotary meetings;

(2) Join a Club Committee and attend the monthly committee meetings;

(3) Participate in signature Club initiatives; and

(4) Pay their annual dues.

**Sponsor**: I have explained the basic expectations as stated above.

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Printed Name Signature Date

**New Member**: I understand and agree to the basic expectations as stated above.

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Printed Name Signature Date