

APPLICATION FOR MEMBERSHIP

APPLICANT:

ADDRESS:

EMAIL:

PHONE:

WORK:

CELL:

SPOUSE:

BIRTHDAY:

FACEBOOK:

INSTAGRAM:

TWITTER:

LINKEDIN:

COMPANY NAME:

WEBSITE:

ADDRESS:

YOUR PROFESSION:

What is your contact preference? HOME WORK

Have you been a rotary member before? If so, please provide the year(s) and club(s) below:

FOR INTERNAL USE ONLY

Board Approved: _____ Date RI notified: _____

Date Inducted: _____ Date Badge ordered: _____

Classification: _____

Please return this form to membership@eastviewrotary.org

APPLICANT DECLARATION OF UNDERSTANDING

In the interests of our motto '*Service Above Self*' and the *Rotary 4-Way Test*, the Rotary Club of Regina Eastview wants new members to succeed in their rotary journey. This declaration of understanding will assist new members with a basic understanding of the expectations that apply to all Rotarians:

- (1) Regularly attend club meetings & events
- (2) Become an active & effective club member, volunteering for events & a committee wherever possible.
- (3) Live by Rotary's 4-way test
- (4) Pay your annual dues.

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

Printed Name

Signature

Date

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

Printed Name

Signature

Date