



Membership Application

The Rotary Club of Sarnia

New Member Application Form

Personal Information *(To be completed by Applicant)*

Prospective Member Name:

Date-Of-Birth:

Business

Business Name/Former employer (ret.):

Position/Title:

Work Address:

Work Phone #: - -

More Information

Residence Address:

Spouse Name (optional):

Personal Phone #: - -

Wedding Anniversary (optional):

Personal Email:

Work Email:

Preferred Form of Communication:	Work #	Personal #	and/or	Personal Email	Work Email
----------------------------------	--------	------------	--------	----------------	------------

Were you previously a
Rotarian? YES

Club(s) Name RI

ID#

from:

to:

Why Rotary?

Tell us about yourself, interest and experiences:

What are you most passionate about?

Why do you want to be part of Rotary Club of Sarnia?

* If you are not completing this form electronically , please use the back of this page for extra space*

Sponsor *(To be completed by Sponsoring Rotarian)*

Sponsoring Rotarian must be a member in good standing of the Rotary Club of Sarnia.

Sponsor's name, please print:

Sponsor's Signature: _____

Date: