

Family Membership Application



Date: ____ / ____ / ____

Family Application Fees: \$35

Please submit this completed form and check payable to FM-AM Rotary for total amount of family members applying.
FM-AM Rotary Club
PO Box 9359
Fargo, ND 58106-9359

This form may be submitted electronically to
treasurer@fmamrotary.com

I. Primary Proposed Member Name: _____
First Last MI

Nickname: _____ Preferred Name on Badge: _____

Sponsor Name: _____ Proposed Birth Date: ____ / ____ / ____

Spouse Name: _____ Wedding Anniversary: ____ / ____ / ____

Primary Email Address: _____ Alternate Email: _____

Cell Phone*: (____) ____ - ____ Business: (____) ____ - ____ Home: (____) ____ - ____

*You will receive weekly messages informing you of Thursday morning meeting guest speakers and other important Rotary announcements.

Home Address: _____
Street City ST Zip Code

Your Job Title: _____ Send mail to: Office Home Email

Previous Rotary Member? No Yes If yes, when? ____ / ____ / ____ Where? _____

Paul Harris Fellow? No Yes Reference Name: _____ Phone: (____) ____ - ____

Please provide a brief biography:

Statement to be signed by proposed member:

I hereby certify that I am qualified for membership both by the current/former position and by having a place of business or residence within the club's territorial limits, adjoining territory, or the same city in which the club is located. If elected, I understand it is my duty to abide by the constitutional documents of Rotary International and the club. I agree to pay an admission fee of \$35 and quarterly dues of \$250 for two memberships, and agree to pay an additional \$75 for each each additional membership in accordance with the bylaws of the club. I hereby give permission to the club to publish my name and proposed classification to its membership.

Proposed Member's Signature: _____

II. Primary Proposed Member Name: _____
First Last MI

Nickname: _____ Preferred Name on Badge: _____

Sponsor Name: _____ Proposed Birth Date: ____/____/____

Spouse Name: _____ Wedding Anniversary: ____/____/____

Primary Email Address: _____ Alternate Email: _____

Cell Phone*: (____) _____ - _____ Business: (____) _____ - _____ Home: (____) _____ - _____

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Your Job Title: _____ Send mail to: Office Home Email

Previous Rotary Member? No Yes If yes, when? ____/____/____ Where? _____

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Proposed Member's Signature: _____

III. Child (1) Member Name: _____ Birth Date: ____/____/____
First Last MI

Please provide a brief biography:

IV. Child (1) Member Name: _____ Birth Date: ____/____/____
First Last MI

Please provide a brief biography:
