

INTERACT CLUB CERTIFICATION FORM

Interact is a club for young people ages 12 to 18 that empowers them to take action, become leaders, and gain a global perspective. Before certification, the Interact club must adopt the Standard Interact Club Constitution and Recommended Interact Club Bylaws. There is NO fee for certifying an Interact club.

To officially certify an Interact club:

*Rotary district number ___

- 1. Complete all required fields (marked with an asterisk) on this form. Please note, collecting email addresses is a vital part of Rotary's communication strategy. All information you submit is subject to Rotary's privacy policy.
- 2. Obtain the signatures of the sponsor club president(s), Interact adviser, and district governor. Rotary will not certify the club if any signature is missing.
- 3. Submit the completed form by email (interact@rotary.org), or by mail or fax to the appropriate Rotary International office.

Once Rotary receives your form, it may take up to six weeks to certify the club and prepare the certificate.

Rotary will email it to the sponsor club president(s) to sign and present to the new Interact club. Even before the official certificate arrives, members of the new Interact club — under the guidance of the sponsor club(s) — can meet, organize, and take action in the community.

INTERACT CLUB NAME AND GENERAL CONTACT INFORMATION

*The name of this organization shall	be the Interact Club of _		
*Date of organization (day (This is the date the club adopted the Standard Inter			_)
*Interact club base (check one): See See See See See See See See See S	thool 🗆 Community		
*In what language does the Interact of	lub prefer to receive cor	rrespondence? (check on	e):
☐ English ☐ French ☐ German ☐	Italian □ Japanese □	I Korean □ Portuguese	e □ Spanish
*City	*State/Province		*Country
Interact club email (Cannot be the sar	ne as any club member's	email address)	W. W.
Interact club website			
INTERACT ADVISER INFORM	ATION		
Although several people may serve in Rotary year (1 July – 30 June).	this role, Rotary Internat	cional requires only one p	adult who works with the Interact club. person, to be reported as an adviser each
*First name	Middle name		*Last/Family name
*Is the Interact adviser a Rotarian or R	otaractor? 🗆 Yes 🗆 N	o If yes, provide the me	embership ID number if known:
*In what year(s) will this adviser serve	? (check all that apply):	☐ Current Rotary year	□ Next Rotary year
		☐ Year following next	
*Interact adviser's email (Enter the email address associated with your My Ro		ail address. Do not use a shared or	club email address.)
*City *	State/Province		*Country
*In what language does the Interact a			
□ English □German □ French □			
		(dav	month)
*Interact club advicer rignature			/

INTERACT CLUB MEMBER INFORMATION

Do not include names or contact information of any Interact club members or officers with this form. If any Interactors would like to register their Interact participation with Rotary International, they can report it, with the permission of a parent or legal guardian, when they are age 16 or older by creating a My Rotary account.

SPONSOR(S)

Active and meaningful engagement by the sponsor club(s) is necessary for success. Interact clubs must be sponsored by at least one Rotary club and may be sponsored jointly by other Rotary and/or Rotaract clubs as long as the total number of sponsors does not exceed three clubs; all sponsor clubs must be within the boundaries of the district in which the Interact club is located. The district governor must approve in writing more than three sponsor clubs after carefully considering whether it is in the best interest of the Interact club. List all sponsor clubs and provide the names and signatures of the president of each.

By signing below, I affirm that I understand and accept the provisions of the Rotary Code of Policies and the Standard Interact Club Constitution and Recommended Interact Club Bylaws. Our club agrees to mentor the club members of this Interact club, guide them in service, and ensure that Rotary receives club contact information annually.

*District governor name	*District governor signature	Date
By signing below, I approve the establishment of to other clubs, and include its members in district ser	this Interact club. I will support and promote the club vice and training events.	, connect its members with
DISTRICT GOVERNOR'S ENDORSEMEN	IT	
Co-sponsor club president signature		Date
Co-sponsor club president name		
Co-sponsor club type (choose one): Rotary Club	☐ Rotaract Club	
Co-sponsor club name		Club ID
Co-sponsor club president signature		Date
Co-sponsor club president name	-	
Co-sponsor club type (choose one): ☐ Rotary Club	☐ Rotaract Club	
Co-sponsor club name		Club ID
*Rotary club president signature		Date
*Kotary club name		*Club ID