



# Rotary Club of Bettendorf New Member Proposal Form

Title:  Mr.  Mrs.  Ms.  Dr.  Other: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Residential Address \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Preferred email address \_\_\_\_\_

Spouse/Partner name \_\_\_\_\_

Occupation/Former occupation if retired \_\_\_\_\_

Position or Title \_\_\_\_\_

Business address \_\_\_\_\_

Sponsor(s) \_\_\_\_\_

Activities that would enhance consideration as a Rotarian: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were you previously a Rotarian?  Yes  No

Club(s) name: \_\_\_\_\_ Dates: from \_\_\_\_\_ to \_\_\_\_\_ RI ID# \_\_\_\_\_

I hereby certify that I am qualified for active membership by my current or former status as a professional, business and/or community leader and by having a residence and/or working within the Club's locality or surrounding area.

I understand that if accepted for membership, it will be my duty to follow Rotary's Four-Way Test in all my daily activities and contacts, and to abide by Rotary International and Club bylaws. I also agree to pay quarterly dues in accordance with Club bylaws. I hereby give permission to the Club to publish my name to its membership.

\_\_\_\_\_  
Proposed Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Club Officer Signature

\_\_\_\_\_  
Board Approval Date