



NEW MEMBER APPLICATION FORM
Lake Placid, NY Rotary Club

Please complete and print this application. You and your sponsor should sign the application and bring it to a club meeting, or mail to LP Rotary, Box 1425, Lake Placid, NY 12946. We're excited to get to know you!

Date: ___/___/___

Sponsor: _____

Proposed Member

First Name: _____ Middle Initial: _____ Last Name: _____

Personal Information

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Home FAX _____

Home Email: _____ DOB ___/___/___

Spouse Name: _____ Spouse DOB: ___/___/___ Wedding Anniversary: ___/___/___

Children's names and DOB _____

Business Information

Business Name: _____ Title: _____

Business Address: _____

Business City: _____ Business State: _____ Business Zip: _____

Business Phone: _____ Ext _____ Business E-mail: _____

Business Fax _____

Do you prefer we contact you at your (circle one) home or business address?

Do you prefer we contact you at your (circle one) home or business phone?

Do you prefer we contact you at your (circle one) home or business e-mail?

Why do you want to join the Lake Placid, NY Rotary Club?

In order to get to know you better, please supply a short ¼ page Bio or resume. Some background info on your Education, jobs, civic/recreational activities, etc. Whatever you'd like to share with the club members.

Are You Transferring from another Club: Y N Club Name: _____

Previous Classification: _____ Member ID # _____ Paul Harris Fellow: Y N

Rotary Offices held: _____

Areas of Rotary Service I am interested in _____

Statement To Be Signed By Proposed Member & Sponsor

I hereby certify that I am qualified for membership by having a place of business or residence within the club's territorial limits.

I understand that it will be my duty, if elected, to exemplify the Object of Rotary in all my daily contacts and activities and to abide by the constitutional documents of Rotary International and the club. I understand that the Goal is 50% Participation (attendance plus Club events). I further understand that my level of Participation is voluntary

I agree to pay prorated dues or the annual dues of \$ 180.00 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.

Date: ___/___/___ Proposed Member's Signature _____

Date: ___/___/___ Sponsor's Signature _____

MEMBERSHIP COMMITTEE:

DATE RECEIVED _____ CLASSIFICATION _____

DATE PRESENTED TO BOARD _____ STATUS _____

PUBLICATION OF NAME TO MEMBERSHIP _____

INDUCTED ON _____

Membership Change: to Honorary Date approved: ___/___/___

Termination: Reason: _____ Date: ___/___/___