

McHenry Area Rotary Club Membership Application

Full Name: _____
Business: _____
Position: _____
Bus. Address: _____
Home Address: _____
Home Phone: _____
Business Phone: _____
Business Fax: _____
Cell Phone: _____
Birthday (Mo/Day): _____
Spouse/Partner name _____ Birthday date: _____
Wedding Anniversary _____
Preferred e-mail address: _____
Proposed classification: _____
Have you been a member of Rotary before: ___ Yes ___ No
If yes, previous club name: _____
Dates: _____

I hereby certify that I am qualified for active membership by my current or former status as a business, professional, or community leader, or as a Rotary Foundation alumnus, and by having a place of business or residence within McHenry, IL or surrounding area.

I understand that, if accepted for membership, it will be my duty 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 agree to pay annual dues in accordance with the club bylaws. I hereby give permission to the club to publish my name and proposed classification, if applicable, to its membership.

Proposed Member's Signature

Date