## **NEW MEMBER ROTARY INFORMATION**

Member Name:				
	Business !	Information:		
Business Name:		Position	1:	
Physical Address:				
Mailing Address (if different): _				
Office #:	_ Office Fax:	Website:		
	<u>Personal I</u>	nformation:		
Physical Address:				
Mailing Address:				
Home #:	Fax:		_ Cell #:	
Your Birthday:	Anniver	sary:		
Spouse Sig. Other Name:			-	
Spouse Sig. Other Birthday: _				
(Please send a jpeg headshot pho			•	Send both to the
	Rotary In  (To be filled out by Member	formation: ship Chair or Club Secret	ary)	_
Member Classification:				
Induction Date:				
Sponsor:				
Mentor:				