



**Rotary Club of Colorado Springs**

P.O. Box 1558  
Colorado Springs, CO 80901-1558  
(719) 640-5648 (Voice Mail Only)  
administration.manager@coloradospringsrotary.org

TINA DEWEY

Your Name (Print)      Nickname

REMAX ADVANTAGE

Firm Name (Former Firm & Exec. Position if Retired)

5590 N ACADEMY BLVD

Firm Mailing Address

COLO. SPRINGS, CO 80918

Firm City, State, Zip Code (9 digit code is preferred)

Firm Street Address

719-548-8600

Firm Telephone Number      Firm Fax Number

TINADHOMES@GMAIL.COM

Firm Email Address

BROKER ASSOCIATE

Your Position in the Firm      Time With Firm

REACTOR

Principal Activity of the Firm

Real estate sales

**Personal and Family Information**

6865 DAUNTLESS CT

Home Mailing Address

COLO. SPRINGS, CO 80919

Home City, State, Zip (9 Digit Zip is Preferred)

Home Telephone Number

Home Fax Number

Spouse's Name

TINADHOMES@GMAIL.COM 2/14/62

Home Email Address

Date of Birth

Previous Rotary Member?      Yes       No

Rotary Club

Membership Dates

Rotary Club

Membership Dates

Rotary Club

Membership Dates

Rotary Office or Achievement

Membership Dates

Prior Rotary Club(s) Classification(s)

PPAR COMMUNITY RELATIONS 2016-present

Community and Civic Involvement      Dates

JUNIOR ACHIEVEMENT 2017

Community and Civic Involvement      Dates

SARAH'S HOME 2019

Community and Civic Involvement      Dates

TESSA FUND RAISER 2017

Community and Civic Involvement      Dates

**Statement to be Signed by the Proposed**

I hereby certify that I am qualified for membership both by the current/former executive position and by having a place of business or residence within the club's territorial limits adjoining territory, or the same city in which the club is located.

If elected, I understand that 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.

For new members to Rotary there is an admission fee of \$200.00 payable with this application. The new member fee will be refunded if the applicant is not approved by the Board of Directors. Upon induction I agree to pay quarterly dues, approximately \$71.00, and pre-paid quarterly meal charges, approximately \$300.68.

I understand I will receive a quarterly invoice dated the first day of July, October, January, and April of each year. As a new member, I will receive a pro-rata charge for the quarterly dues and meal expense on the initial invoice.

I hereby give permission to the club to publish my name and proposed classification to the membership.

Tina Dewey      1/28/2020  
Signature of Applicant      Date

Kris Medina      1/31/2020  
Sponsor Name (Print)      Date

2/12/2020  
Orientation Completion Date

2/17/2020  
Board Approval Date

Member Assimilation Completion Date

Please Mail This Information to:  
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