



APPLICATION FOR MEMBERSHIP ROTARY CLUB OF SOUTHSIDE CORPUS CHRISTI

I herewith apply for membership. In making this application I certify that:

- a) I understand the rules governing attendance and Rotary Engagement;
- b) I have been briefed on the requirements of the admission fee and semi-annual dues; &
- c) I give permission to the club to publish my name and proposed classification to its membership.

Applicant signature

The biographical information below will be used for introduction and administrative purposes. Items marked with an asterisk (*) will be listed in the Member Access only club directory. We highly recommend you list your residence as your mailing address. Please print legibly.

*Name _____ *Nickname _____

*Business Address _____ *Bus. Phone _____

Home Address _____ *Home Phone _____

*Mailing Address _____ *Fax _____

*Cell _____

*Firm Name _____ *Position _____

*Firm Address _____ *E-mail _____

*Birthday (Mo/Day/Yr) _____

Education (Degree) _____ College _____

Previous Rotarian? (Where/Club Name) _____

Positions Held _____

If yes, RI Member ID _____ Paul Harris Fellow (y/n) _____

Other organizations _____

*Spouse's/Partner's name _____ Children/ages _____

Admission Fee & Dues are paid at Installation Ceremony
Payable by check: Rotary Club of Southside Corpus Christi or by credit card at
<http://southsideccrotary.org>

PLEASE RETURN COMPLETED FORM TO THE EXECUTIVE SECRETARY

CLUB ACTION: Approved by _____ Date _____

Proposed by _____ Classification _____