



Rotary Club of Framingham

Application to be completed by all proposed for membership and returned to the Club Secretary

PERSONAL:

Title: _____ First Name: _____ Middle Name: _____ Last Name: _____

Preferred Name: _____ (call/nick name) Birth Date: _____ Application Date: _____

HOME ADDRESS:

Street: _____ Phone Number: _____

City/Town: _____ Cell Phone Number: _____

State: _____ Zip Code: _____ E-Mail: _____

EDUCATION LEVEL: (Degrees/Diploma/Certificate)

Name of School: _____ Degree: _____

_____ Degree: _____

_____ Degree: _____

LANGUAGES (Other than English) Speak: _____ Write: _____

Speak: _____ Write: _____

COMPANION: First Name: _____ Birth Date: _____

Last Name: _____

Married: Yes No (Please Circle) Anniversary Date: _____

CHILDREN:

Name	Gender (M/F)	Birth Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

BUSINESS:

Company Name: _____

Job Title: _____

Responsibilities: _____

Business Location:

Street: _____ P. O. Box No. _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ E-Mail: _____

Web Site: _____

(If needed, attach any additional information)

PERSONAL PREFERENCES:

- Club e-mail sent to; Home ____, Office ____
- Club phone calls to; Home ____, Office ____, Cell ____
- Club billing sent to; Home ____, Office ____

PRIOR ROTARY CLUB MEMBER:

Name: _____

Club No: _____ District No: _____

Date: From _____ Date Resigned _____

CLUB: (To be filled out by Sponsor and Member of Executive Committee)

Sponsor: _____

Classification: _____ RI No: _____

Member Type: _____ Attendance Type: _____

Membership Date: _____