

League City
Rotary
Club



MEMBERSHIP APPLICATION

NAME: _____

HOME ADDRESS: _____

PREFERRED EMAIL ADDRESS: _____

HOME PHONE: _____ MOBILE (CELL) PHONE: _____ (Circle Primary)

NAME OF BUSINESS: _____

BUSINESS ADDRESS: _____

TITLE: _____ CLASSIFICATION: _____

BUSINESS PHONE: _____ FAX: _____

May we contact you at these numbers? YES or NO

BIRTHDAY (MONTH/DAY): _____

SPOUSE NAME: _____ WEDDING ANNIVERSARY (MONTH/DAY): _____

FORMER ROTARIAN?: YES: _____ NO: _____ IF YES, THEN MEMBER ID: _____

CLUB NAME/NO: _____ DATES: _____

LANGUAGES SPOKEN BESIDES ENGLISH: _____

ACTIVITIES/INTERESTS THAT WOULD MAKE YOU A GREAT ROTARIAN:

SPONSORING ROTARIAN: _____

CLUB: _____

I understand that it will be my duty, if elected, to exemplify the Objects of Rotary in all my daily contacts and activities and to abide by the constitutional documents of Rotary International and the club to which I have applied. I agree to pay the established club dues timely and in accordance with club policy.

SIGNATURE: _____ DATE: _____