

**Rotary Club of Michigan City Indiana
New Member Application**

Member Details

Title		Gender	
First Name		Birthdate	
Middle Initial		Anniversary	
Last Name		Spouse/Partner First Name	
Suffix		Spouse/Partner Last Name	
Nickname		Spouse/Partner Nickname	
E-mail		Spouse/Partner Birthday	
Why do you want to join Rotary?			

Home Information

Address Line 1		Home Phone	
Address Line 2		Mobile Phone	
City		Home Fax	
State			
Zip Code			

Work Information

Company Name		Position/Title	
Address Line 1		Business Phone	
Address Line 2		Business Fax	
City		Website URL	
State		Primary Address	Home <input type="checkbox"/> Work <input type="checkbox"/>
Zip Code		Primary Email	Home <input type="checkbox"/> Work <input type="checkbox"/>
		Primary Phone	Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/>

Rotary Information

Sponsor	
Previous Club	
Member Type*	
Application Date	

*Active, Corporate