Lenexa Rotary New Member Information Sheet

ast Name:	
First Name:	
Home Address:	
City:	
State:	
Zip:	
Classification (job description; i.e., "Tax Accounting"):	
Company Name (if applicable and desired):	
Partner Name (if applicable):	
Home Phone (with area code):	
Work Phone (with area code):	
Cell Phone (with area code):	
Primary e-mail:	
Secondary e-mail:	
Birthday Day/Month/Year:	
Anniversary Day/Month/Year:	
Photo submitted for Club Directory	