Jayhawk Breakfast Rotary Club

P.O. Box 691 Lawrence, KS 66044-0691



Membership Application

Please return this application to Larry Stoppel, Membership Chair, at ldstoppel@gmail.com.

Name:

Birth Date:

Applicant Name:	Birth Date:
Name to Appear on Badge:	Spouse's Name:
Business Address:	Business Phone:
Personal Address:	Personal Phone:
Preferred Email Address:	Cell Phone:
Billing Address (check one): Personal Business	Other (specify)
lf a former Rotarian, list club(s) and dates:	
If affiliated with a business: Name of Business:	Position:
Principal activity of business:	
Principal activity of applicant: If different from that of employer or if independently engaged in a pro	
List organizations, boards, and community activities:	
Sponsor/Proposer Signature	Date
I understand that it will be my duty, if elected, to exemplify the activities, and to abide by the constitution and bylaws of the dues will provide me with an annual subscription to the official regional magazine as may be applicable. I agree to pay the ad \$30.00 in accordance with the bylaws of the Club. Meal copermission to the Club to publish my name and proposed class	Club. I understand that part of my membership Rotary Magazine or an approved and prescribed mission fee of \$40.00 and the quarterly dues of sts are currently \$15 per week. I hereby give
Applicant Signature	Date

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Record of Action on Proposal

te Proposal Received by Secretary:
te Proposal Submitted to Board:
ard Decision:
te Proposer Notified:
te of Orientation:
te Card Signed and Remittance Received:
te Published to Membership:
te of Induction:
ssification: