

Membership Application

Download PDF file, select print, then open in PDF preview. Now you can fill our form. Email completed form to:
olathenoonrotary@gmail.com
Olathe Rotary Club



Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Cell Phone	
Date of Birth	
E-Mail Address	

Employer Name and Address

Name	
Street Address	
City ST ZIP Code	
Employer	
Your position/Profession	

If transferring from another Club, please give us the Club name and your Rotary member number

Club Name	Your Rotary Number
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Please give us your Rotary sponsors name

Sponsor Name	Sponsor email
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Interests and Unique Skills

(Tell us what you do. i.e. Banker, Sales, Medical, Retired, Accounting, Government, etc.)

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Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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Previous Rotary or Community Volunteer Experience

Summarize your previous Rotary or volunteer experience and why you want to join our Rotary Club.

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Spouse/Partner

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Anniversary	
Children	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member of the Olathe Rotary Club, I will be timely with my Dues, faithful in attendance and active in Club activities/duties.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in Rotary membership.

Administrative Section

Dates of membership: _____

Classification: _____

Sponsor: _____

Induction Date: _____

RI Number: _____

Orientation Requirements met? _____

Dues Paid: _____