

# Akron Rotary Prospective Member Information Form

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## SECTION 1:

This section must be completed. Your personal profile information is confidential and submitted to the Rotary International, Rotary District and Akron Rotary Club databases. We do not sell or share member data to third parties. Birthday and Anniversary data can only be viewed by Club Executives and are used only for demographic purposes. **\*Indicates required fields**

PLEASE EMAIL THIS FORM WITH YOUR PHOTO TO: [TKNAUER@ARTISTSINC.NET](mailto:TKNAUER@ARTISTSINC.NET)

*Your Photo will be used in our on-online directory and to announce your membership when approved.*

**Name \***

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Title      First      Last      Suffix

**Nick Name** (i.e. Robert is your given name but you prefer to go by Bob you would enter Bob in this field).

**Please indicate your gender.** This is for demographic purposes only and does not affect your membership proposal. \*

- Male                                       Female  
 Another Gender Identity               Prefer Not to Identify

**Please provide your date of birth.** This is for demographic purposes only and does not affect your membership proposal. \*

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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MM    DD    YYYY

**Have you ever been a member of Rotary?**

- Yes  
 No

If you were previously a member of Rotary, please advise if you earned any of these designations (we may contact you for additional information if needed). Circle any that apply.

Bequest Society Member

District Officer

Past District Governor

Past President

Paul Harris Fellow

Paul Harris Society

PHF +1-9

Sustaining Member

Please provide two–three paragraphs about yourself (i.e. background, boards, hobbies, service in the community, family, etc.) Should your membership be accepted, this information may be used in our announcement to help our members get to know you. Use the back or attach another sheet if needed.

Spouse/Partner Name

First Last

Spouse/Partner Nickname

Spouse/Partner Birthday

 /  / 

MM DD YYYY

Anniversary Date

 /  / 

MM DD YYYY

Primary Email: All Club and District Communications will only be sent to the primary email address. \*

Alternate Email

Preferred Mailing Location \*

- Home Address  
 Business Address

Please select your Preferred Phone and be sure you provide the phone number when indicated within this form. \*

- Cell Phone Home  
 Phone  
 Business Phone

**Home Address \***

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

**Home Phone Number**

 -  - 

**Cell Phone Number**

 -  - 

**Company Name**

Your Position/Title

**Business Address \***

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

**Business Phone Number**

\_\_\_ - \_\_\_ - \_\_\_ Ext: \_\_\_\_

**Primary Emergency Contact Name \***

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First            Last

**Primary Emergency Contact Phone Number \***

	-		-	
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**Secondary Emergency Contact Name**

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First            Last

**Secondary Emergency Contact Phone Number**

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We have a special recognition we provide to Veterans. Have you ever served in the United States Military?

- Yes
- No

By signing below\*, you are indicating that you have fully read, understand and agree to the following terms/conditions:

I hereby agree that all information provided above is accurate and that I am requesting to become a member of The Rotary Club of Akron. I understand that completion of this information form does not guarantee acceptance. I hereby certify that I am personally and actively engaged in the business, profession or activity as indicated and that my place of business or residence is located within the territorial limits of The Rotary Club of Akron. I understand that it will be my duty to exemplify the Object of Rotary in all my daily contacts and activities, and to abide by the constitution and bylaws of The Rotary Club of Akron.

I understand that each new Rotarian is required to be active in two (2) committees, one of which will be the Chili Open Committee. New members will be assigned to committees according to their interests and the needs of the club.

I hereby submit this information form, photograph and permission to publish information about me including but not limited to name, classification, employer, background and photograph to members and others on the Club/District mailing list.

I agree that my personal information may be collected and stored for the purposes of The Rotary Club of Akron, Rotary District 6630 and Rotary International and that my information will not be sold to any third-party entity.

I understand that my date of birth and gender are being requested solely for demographic purposes and have no bearing on membership acceptance.

If my membership is approved, I agree to pay within 30 days of being invoiced: the \$75.00 new member processing fee payable to The Rotary Club of Akron and the pro-rata portion of the \$349.00 dues for the July 1 – June 30 2021–2022 Rotary year and all applicable dues thereafter. I will pay these fees within 30 days of being electronically invoiced via email by The Rotary Club of Akron. After 30 days, I understand that I will accrue a late fee in addition to my dues and that failure to pay dues can result in termination of membership. I understand that it is my responsibility to ensure that I am able to receive such electronic communications.

Upon acceptance of my membership, I give permission for The Rotary Club of Akron, Rotary International District 6630 and Rotary International to use my image, and the image of any guests that I bring with me to Rotary meetings or events. The image(s) may be used for ongoing Rotary promotions/announcements, in all formats (i.e. print, electronic, etc.), and I hereby release these entities from any liability and/or remuneration for such use. \*

**I have fully read and agree to the terms as outlined above.**

**Your Printed Name** \_\_\_\_\_

**Your Signature** \_\_\_\_\_

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SECTION 2:

The following information is gathered to help us help you. If you are elected to become a member, we will use this data to help match you with a mentor and committee(s) that best meet your interests.

**Your answers have no impact regarding acceptance as a member of the Rotary Club of Akron.**

Mentor Assignment. All of our Mentors are members in good-standing but we want you to feel comfortable with the mentor we assign to you. Please let us know if you have a gender preference for your Mentor. (required field) \*

- Does Not Matter
- Female
- Male

Please indicate your interests below.

	Not Important At All	Not Important	Neutral	Important	Extremely Important
International service programs	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Youth programs/activities	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Programs to promote tolerance/diversity	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Programs for the underprivileged	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Elementary, Middle and High Schools	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Institutions of Higher Education	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Local government/ citizen involvement	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Community aesthetics/ beauty	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Recreational programs/ facilities	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Health programs and research	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

What other issues or programs do you feel are important? (Please list and explain.)

In what ways would you support these important issues and/or programs? Select all that apply.

- Cash donation
- Donation of goods
- Purchase of tickets
- Volunteer time/skills
- Volunteer equipment and other resources
- Other, please specify