

BARBERTON ROTARY CLUB
NEW MEMBER DATA FORM

DATE _____

SPONSOR: _____

NAME: _____

NAME FOR BADGE: _____

HOME ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

FAX: _____ CELL PHONE: _____

E-MAIL: _____

BUSINESS CLASSIFICATION: _____

BUSINESS NAME & ADDRESS: _____

PREFERRED MAILING ADDRESS: PLEASE CHECK: HOME _____ WORK _____

MEMBER BIRTH DATE: MONTH, DAY & YEAR: _____

SPOUSE NAME: _____

SPOUSE'S BIRTH DATE: MONTH & DAY: _____

WEDDING ANNIVERSARY: MONTH, DAY & YEAR _____

CHILDREN'S NAME (S): _____

PAST ROTARY CLUB LOCATION, EXPERIENCE AND YEARS SERVICE: _____

HOBBIES: _____

TO BE COMPLETED BY CLUB: INDUCTION DATE: _____