Rotary Club of Hudson Membership Proposal Form

I propose:				
Name				
Business				
Business Address	City	State	Zip	Telephone
Residence Address	City	State	Zip	Telephone
Spouse's Name				
E-mail Address		Date of Birth		
Type of membership app	lied for (check o	one):		
Active Rotarian		Rotary Partner		Rotary Friend
Badge Name				
If a former Rotarian, list	club(s) and da	te(s):		
Activities which would	enhance consid	deration as a R	otarian:	
Date Spo	onsor's Signatur	•e		