

Membership Application

- Please give your completed application and \$65 check payable to Five Trails Rotary Club to the Rotarian who is sponsoring you
- Decisions are made by the board on the 2nd
 Wednesday of each month

TO BE COMPLETED BY THE APPLI	CANT (PROPOSED MEMBE	R):	
Name:	Badge Name:		
Preferred Email:	Alternate:		
Location to send The Rotarian ma	igazine (check one): 🛛 Ho	me Address 🛛 🗆 Business Address	
Home Address (mailing):			
Home Phone:	Cell Phone:		
Company Name:	Position/Title:		
Business Address (mailing):			
Business Phone:	Fax:	Website:	
Birthday:	Spouse's Name:	Years in Casper:	
If a former Rotarian, where?		When?	
What is your occupation? If retire	d, what was your occupation	on?	
How many Rotary meetings have	you attended so far?		
 I understand Rotary is a servic through club activities. 	e club and active Rotarians	provide 15-25 hours of service per year	
□ I understand that meetings ar	e held weekly and having a	n attendance rate of 75% is valued.	

- □ I understand Rotary dues are billed at \$350 every 6 months (total of \$700 per year) via email. I will ensure dues are paid on time, regardless of whether the payment is made by me or my employer.
- □ I understand that model Rotarians become "Sustaining Members" by contributing \$100 a year to the Rotary International Foundation. These contributions will be put towards earning a Paul Harris Fellowship, which is granted for each \$1,000 contributed to the Rotary International Foundation.

Other information you would like to share with the Membership Committee and Board of Directors:

Applicant Signature: ______

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How long have you known the proposed member? In what capacity?		In what capacity?
The membership app	blication process will take place as follows:	
 Applications a completed hi A member of member to o Secretary. The Club Secretary 	nd place the completed application in the N are due on the 1 st Thursday of each month s/her section and the application fee is atta the Membership committee will pick up th utline the responsibilities of membership, a retary will present this application to the Bo e proposed member of the Board's decision	. Please ensure the applicant has fully ached. his application, meet with the propose and pass this application on to the Clu oard on the 3 rd Thursday of the month
Proposer Signature:		Date:
TO BE COMPLETED E	BY THE CLUB SECRETARY:	
Board decision:	pprove membership 🛛 Deny membershi	ip Date:
Begin billing date:		
	□ Application fee received and given to □ Published in Membership Binder for tw	
		wo weeks Dates:
	 Published in Membership Binder for tw Entered into ClubRunner Date: 	wo weeks Dates:
	 Published in Membership Binder for tw Entered into ClubRunner Date: 	wo weeks Dates: Password

Casper- Five Trails Rotary Club PO BOX 703, Casper WY 82602 <u>fivetrailsrotaryclub@gmail.com</u> <u>www.clubrunner.ca/fivetrails</u>

