



St. Louis Park Rotary Membership Application

PERSONAL

Full Name: _____

Home Address: _____

City/State/ZIP: _____

Email Address: _____

Home Phone: _____ Mobile Phone: _____

Date of Birth: _____ Significant Other: _____

PROFESSIONAL

Employer Name: _____

Occupation/Job Title: _____

Work Address: _____

City/State/ZIP: _____

Email Address: _____

Work Phone: _____ Mobile Phone: _____

Professional Status/Classification for Club Records & Nametag: _____

*Please return this completed form attention to Membership Chair, Derek Reise, at
derekreise@gmail.com or P.O. Box 26728, St. Louis Park, MN 55426.*

APPLICATION

Name of club sponsor: _____

How did you learn about the St. Louis Park Rotary?

Why do you wish to join the St. Louis Park Rotary?

What club committees or projects are you interested in joining?

If you have previously been in Rotary, please list the club name, location, and dates of membership.

I understand the expectations of membership and agree to abide by them.

Signature _____

Date: _____

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