

Membership Proposal Form Skaneateles Rotary Club

PART A (to be completed by proposer and returned to the club membership chair)

I propose:

Title (e.g. Mr., Ms., Mrs., Dr., Rev.,) _____ Suffix (e.g., Jr., Sr., III) _____

Family Name: _____

First Name: _____ Middle name: _____

DOB: _____ Spouse's name: _____

Current (or former) firm and position: _____

Telephone (including area code) _____ Fax (including area code) _____

Residence: _____ Residence: _____

Business: _____ Business: _____

Cell: _____

Preferred e-mail address: ☐ Residence ☐ Business

Preferred mailing address: ☐ Residence ☐ Business

Street: _____ Apt/Suite _____

City: _____ St.: _____ Zip: _____

Proposed classification (occupation): _____

If a transferring or former Rotarian, list previous club information:

Name: _____ Name: _____

Dates: _____ Dates: _____
from to from to

Recent transfer (one year or less) ☐ Yes ☐ No

If an RI program participant or Foundations alumnus/a, list program(s) and date(s)

Activities that would enhance consideration as a Rotarian: _____

Proposer's Name & Signature: _____

Date: _____