

New Member Information Form

Rotarian Information

Notarian information			
Your Name			
Your Birth Date			
Sponsor			
Rotary Classification/Vocation			
(what is your job/vocation)			
Business Information			
Your Business Title			
Business/Employer			
Mailing Address			
	City:	St:	ZIP:
Work Phone Number		Cell Phone:	
E-mail Address		Fax Number:	
Home Information			
Home Phone Number		Cell Phone:	
E-mail Address		Fax Number:	
Mailing Address			
	City:	St:	ZIP:
Family Information		Birthday	Wedding Anniversary
	Name	Month/Day/Year	Month/Day/Year
Spouse		1 1	1 1
Children		<u> </u>	
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Describe why you	ı want to join and what you hope to get out of membership?
le want to know	what motivates you to serve. What specific interests/causes are you passionate about?
Ve want to get to	know you. How do you like to spend your free time?
Ve want to equip	you to serve where you fit. What committees in our club may interest you?
Men	nbership Public Image Service Foundation Giving Ethics
	couples' membership \square or a corporate membership \square , please indicate which complete one form for each participant.
Please e-mail th	is completed form to mschaap@dmshb.com