



Rotary Club of Pottstown Membership Request Form

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____

Home Email: _____

Company: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Telephone: _____

Business Email: _____

Preferred Contact: Home Business

Title: _____

Nature of Business: _____ (For Badge)

If former Rotarian, list club(s) and dates:

If retired, list employer/profession and position at time of retirement:

Activities which would enhance consideration as a Rotarian:

Sponsoring member: _____

Member Type: Active Service Family Corporate

Email the above information completed to Membership chair Amira Heim at amira_heim@yahoo.com – a confirming reply will be sent within 24hrs.

Any questions can be directed to Amira or Lauren McCloskey, Club President, at pottstownrotary@gmail.com