## The Eagan Rotary Membership Application

My Full Name (print or type):	
Date of Application/Classification:	
My Firm's Name:	
Previous Rotary Memberships:	
My position (check one) Proprietor Other	r Officer Partner Manager Executive
Sponsored By:	
My business address (street, city, state,	zip):
My home address (street, city, state, zip	):
Business Phone:	Fax:
Home Phone:	Fax:
Business email:	
Home email:	
Birthday:	
Electronic Signature:	
Hometown/State:	
Other interests/hobbies:	

To assist the Board of Directors and the Membership Committee in this process, please answer the following questions to the best of your ability (to be filled out by Rotarian proposing new member):
Do you know this individual personally? Yes No
If yes, how well do you know this person?
Is this person, or has this person ever been a member of a Rotary Club or other service organization? Yes No
If yes, please give details:
Describe other activities this person is involved with which will enhance consideration as a Rotarian:
In your opinion, which avenue of service would this person be best suited for?
ClubCommunityVocationalInternational
Please detail why this individual will be an asset to the Rotary Club of Eagan.
Date:
Signature of Proposer:
Daytime Phone Number of Proposer:

## Date proposal was received by the Membership Committee: Action taken by Membership Committee: Action taken by Membership Committee: Approval Rejected Returned to the proposer for additional information: Individual published in bulletin on: Proposer notified to formally advise individual of our desire: Dates of the four meetings attended: Orientation conducted on: Induction date:

Once completed, please email your application to Jeffrey Larson: jeffreyb@jblcompanies.com