

ROTARY CLUB OF LAKE MINNETONKA-EXCELSIOR - APPLICATION

NEW MEMBER INFORMATION

First Name: <input type="text"/>	Last Name: <input type="text"/>
Preferred First Name: <input type="text"/>	DOB: <input type="text"/>
	Gender: <input type="text"/>

PERSONAL CONTACT INFORMATION

Street/PO BOX: <input type="text"/>	City: <input type="text"/>	State: <input type="text"/>	Zip Code: <input type="text"/>
Phone Number: <input type="text"/>	Cell Phone Number: <input type="text"/>	E-mail Address: <input type="text"/>	

BUSINESS CONTACT INFORMATION

Company Name: <input type="text"/>	Occupation: <input type="text"/>	Title: <input type="text"/>
Street/PO BOX: <input type="text"/>	City: <input type="text"/>	State: <input type="text"/>
		Zip Code: <input type="text"/>
Phone Number: <input type="text"/>	Cell Phone Number: <input type="text"/>	E-mail Address: <input type="text"/>
Website Address: <input type="text"/>	Sponsor's Name: <input type="text"/>	

Previously A Rotarian? Yes No If Yes

Previous RI Number: <input type="text"/>	Club Name: <input type="text"/>
Date Joined: <input type="text"/>	Date Left: <input type="text"/>
	Offices Held/Date: <input type="text"/>

INTERESTS AND HOBBIES

COMMUNITY AND OTHER ORGANIZATION POSITIONS HELD

WHY DO YOU WANT TO JOIN THE EXCELSIOR MORNING ROTARY CLUB? WHAT DO YOU HOPE TO CONTRIBUTE?

SIGNATURE INFORMATION

I understand it will be my continuing responsibility, if accepted into membership, to exemplify the objectives of Rotary in all my daily contacts and activities, and to abide by the Constitution and Bylaws of the Lake Minnetonka-Excelsior Rotary Club (LMERC) and Rotary International, the chartering entity for all Rotary Clubs.

There are several LMERC annual events and activities that are designed to generate financial and other support for our Rotary Club, Rotary International, and/or the Rotary Foundation and their respective compatible missions, which I hope to support.

Signature <input type="text"/>	Date: <input type="text"/>
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CLUB INFORMATION

Rotary International Number: <input type="text"/>	Membership Date: <input type="text"/>	Membership Type: <input type="text"/>
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When form is complete, please print or save and email to hello@ExcelsiorMorningRotary.org