## CLUB MEMBERSHIP INQUIRY



PERSONAL	INFORMATION
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Name: Home address:			PO Box 155 Ludlow MA 01056
Street			
City	State	Postal code	
Home phone:			
Home e-mail:			
PROFESSIONAL	INFORMATIO	N	
Business/compan	y name:		
Business address	:		
Street			
City	State	Postal code	
Business phone:			
Professional			
Type of business			
l prefer to receive Home Work	Rotary mail an	d e-mail at:	
Why would you lik	e to join our clu	ıb?	

Are you a past member of a Rotary club? Yes No

If so, club name and location:

Years/	dates:
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Former ID #: \_\_\_\_\_

Are you a past participant of a Rotary International or Rotary Foundation program? Yes No

\_\_\_\_\_

Which program?

Years/dates: \_\_\_\_\_

Rotarian reference or sponsor: