

## MEMBERSHIP APPLICATION

**Please complete this form in its entirety**

Should your application be approved this information is required  
for registration with Rotary International  
and will be maintained in the RI/Club Database

Your Full Name \_\_\_\_\_

Name for Your Badge (*Nickname, Name friends call me*) \_\_\_\_\_

Your Full Date of Birth \_\_\_\_\_

**HOME** Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**BUSINESS/ORG.** Name \_\_\_\_\_

Your Position There \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Prior Rotary Affiliation**     Yes     No

If yes,      Name of Club \_\_\_\_\_

Membership Dates \_\_\_\_\_ Rotarian ID # (if known) \_\_\_\_\_

Are you a current member transferring from club named above (check box)     Yes     No

The Rotarian Magazine is mailed. To where would you prefer it mailed?    \_\_\_\_\_ Home    \_\_\_\_\_ Business

**Other Information:**

Spouse's Name \_\_\_\_\_ Spouse's Birthday (MM/DD/YY) \_\_\_\_\_

Wedding Anniversary (MM/DD/YY) \_\_\_\_\_

I, \_\_\_\_\_ hereby propose \_\_\_\_\_  
sponsor candidate

\_\_\_\_\_  
Sponsor Signature:

\_\_\_\_\_  
Date

Proposed New Member's Rotary Classification \_\_\_\_\_

# MEMBERSHIP APPLICATION Cont.

I \_\_\_\_\_ hereby affirm that I am qualified for active membership by my current or  
print applicant name

former status as a business, professional, or community leader, or as a Rotary Foundation alumnus/a, and by having a place of business or residence within the club's locality or surrounding area.

I understand that as a member, if accepted, it will be my duty to exemplify the Object of Rotary in all my daily contacts and activities and to abide by the constitutional documents of Rotary International and the Club. I agree to pay any admission fees required by the club and to pay annual dues in accordance with the club bylaws. I hereby give permission to the club to publish my name and classification to its membership.

\_\_\_\_\_  
Applicant Signature:

\_\_\_\_\_  
Date

