



ROTARY CLUB OF LA GRANGE

Family Member Plan

The Family Member Plan (the Plan) allows members of a family who reside at the same address as a traditional individual member of the Rotary Club of La Grange (the Club) to apply for membership in the Club. The Plan member, having all rights, privileges, and responsibilities of a member. The plan member may choose whether or not to participate in regular Wednesday noon meetings. Historically, individual member's family has contributed to Club activities and fundraising to a critical and essential degree necessary for success. The Rotary Club of La Grange recognizes the family contribution and invites application of the family member as a Club member.

As a Rotary family member, please consider the following administrative provisions and apply for membership:

1. Approval. Any member of a family in which there is a traditional individual member of the Rotary Club of La Grange may be considered for Club membership under the standard approval process as long as the applicant is twenty-one (21) years of age or older. Membership fees will be \$70.00 quarterly.

2. Status. Each member accepted under the Family Member Plan will have every right, privilege and obligation of any other member including, but not limited to, voting on all Club issues, policy and other business presented for a vote, holding office in the Club, participation on committees, participation in all Club activities including the county fair hamburger booth and pancake supper; and, the obligation to abide by the constitution and bylaws of the Rotary Club of La Grange. Attendance at the weekly lunch meetings is optional.

3. Continuing Eligibility. Should the traditional individual Club member in the Plan member's family residence who pays full fees of \$181.00 each quarter, cease to be a member of the Club, the Plan member shall be required to convert their membership to an individual plan.



Rotary Club of La Grange Family Plan Membership Application

Applicant's full name: _____

Preferred given name or nickname: _____

Preferred mailing address: _____

Email address: _____

Mobile telephone number: _____

Family residence physical address: _____

Residence telephone number: _____

My month and date of birth: _____

Business/Employer: _____

Employment physical address: _____

Employment telephone number: _____

Employment position or title: _____

Previous Rotary membership(s): _____

I apply for membership, and when elected by the Board of Directors, will strive to exemplify the mission and object of Rotary, will participate as required and within my ability, will abide by the constitution and bylaws of the La Grange Rotary Club; and, will pay quarterly, total fees in the sum of \$70.00 to the Club together with such future increases as may occur.

Date: _____ Signature: _____