



Birthday - _____

Wedding Anniv - _____

Rotary Club of Hilo Bay
Membership Proposal Form

To be completed by Sponsor/Proposer and returned to the club secretary.

Title: (Mr., Ms., Mrs., Dr., Rev., Etc.) _____ Suffix: (Jr., Sr., III, Etc.) _____

Last Name: _____

First Name: _____ Middle Name Initial: _____

Name of Spouse: _____

Home Address: Street: _____

City/State: _____ ZIP: _____

Current (or former) Firm and Position: _____

Position: _____

Address: _____

City/State: _____ ZIP: _____

Telephone Numbers (Include Area Code)

Fax Numbers (Include Area Code)

Residence: _____

Business: _____

Cellular: _____

Preferred E-Mail Address: () Residence () Business _____

Membership Type: () Active () Honorary

If Active, Proposed Classification: _____

If a Transferring or Former Rotarian, List Previous Club Information:

Name: _____ Membership Dates: _____ to _____

Name: _____ Membership Dates: _____ to _____

Name of Sponsor/Proposer: _____

References:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

For Office Use Only:

Date of Orientation (Membership Committee): _____

Classification (Classification Committee): _____