

ROTARY CLUB OF HONOLULU SUNRISE Please Send To: Rotary Club of Honolulu Sunrise PO Box 1317 Honolulu, HI 96807 Ph: 847-0141

Email: rotary.honolulusunrise@gmail.com

For Office Use Onl	y
Publication	#XX
Orientation	
Introduction	
Badge Number	
Mentor	

Full Name					Preferred Name on Badge		
Business Title Membership Options		Type of Business			Business Phone		
					Cell Phone		
Regular	Corporate	Young Professional	Spousal	Fully Retired	T-shirt Si	T-shirt Size (bigger is better)	
Business Name and Address			Business Fax 1		iness Fax Number		
	Describe Prop	oosed Member's Primary F	Responsibiliti	es in His/Her Bus	iness		
Name of Sp	ouse	Home Address			Home Phone	Birthdate	
		/Associations/Membership	■con:	LI VIII		E-Mail Address	
hree references and phone numbers (should be be not			Business Phone		Relationship		
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Date		Proposer		Busine	ss Phone	Home Phone	

Tell us about yourself. Include hobbies, interests, spare time activities: