

Gateway Rotary Membership Proposal Form

I propose:

Prefix: *(check one)* Mr. Ms. Mrs. Dr. Other

First Name

Last Name

Gender: Male Female _____
 Fill in the blank

Date of Birth: _____

Preferred Phone Number: _____

cell home work

Email address: _____

RI Number: _____ *(if former or transferring Rotarian)*

Prior Club: _____

Proposed Classification: _____

Mailing Address: _____

City & Zip: _____

Business Name: _____

Position/Title: _____

Business Address: _____

City & Zip: _____

Gateway Rotarian Proposer's Name: _____

Date: _____

In the space below, please provide information regarding the prospective member (background, community involvement, interest in Rotary)
