



Rotary Club of Verrado

Application for Membership

rotaryverrado@gmail.com

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Sponsored by Rotarian: _____

Date of Birth (year optional) _____

Spouse/Sig.Other Name _____ Anniversary Date _____

Profession/Occupation (if retired former profession) _____

Previous Rotary Member? YES NO Club Name _____ Club Location _____

Other Activities or service organizations you have been involved with:

Sign and Date

Signature	Date