

MEMBERSHIP FORM

Member Information

Full Name												
Sponsor's Name						Date Of Birth						
Spouses Name							М	М	D	D	Y	Υ
Home Address												
City						Country						
Postal Code						Phone						
E-Mail												
Retired	Yes	No	Busine	ess Addres	s							

Please describe your occupation

Past or Current Club Information

Are you currently a Rotarian?	Yes	No	Have you ever been a Rotarian?	Ye	s	No		
If Yes to above, list current/past club and dates of membership								
List positions held in current/past club.								
Describe your current activities								
List any Rotarians you may know								

I Understand this application does not constitute membership approval. Further, I agree to be financially responsible for all individual club expenses including dues, meals and other membership related expenses.

Signature

Date

For additional membership information call: Jim Fitzpatrick 239-301-8168

For Club Use Only:

Action of Classification Committee	Approved	Yes	No	Action of Membership Approval Committee				
Date::			_	Date::				
Proposed Classification:	Approved	Yes	No	Action by Board of Directors:				
Date:				Date::				

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