



MEMBERSHIP APPLICATION FORM

Rotary International

Proposal for Membership of Rotary Club of SCARSDALE

Name: _____

Home Address: _____

Postcode: _____

Home Telephone: _____ **Mobile:** _____

Business/Employer Name: _____

Position Title or Description: _____

Business Address: _____

Postcode: _____

Business Telephone: _____ **Fax:** _____

Email: _____

Date of Birth: (Month/day) _____

Partners Name _____

Children's Names (and their ages if under 18) (Not Required) _____

Proposed Classification: _____

Previous Rotary Club: _____

Some vocational and personal background details that will enhance your activities as a Rotarian:

I hereby certify that if accepted to Membership of the Rotary Club of Scarsdale, that I as a Rotarian, will exemplify the Object of Rotary in all my daily contacts and will abide by the constitutional documents of Rotary International and the club. I agree to pay an admission fee and dues in accordance with the bylaws of the club.

Signature: _____ **Date:** _____

Proposed Member Nominated by: _____

Board Approval on: _____