

MEMBERSHIP APPLICATION FORM

Potential Member Details:

Surname: _____ First Names: _____ Date of Birth: _____

Physical Address: _____

Postal Address: _____

Phone: _____ Mobile: _____ E-Mail: _____

Interests & Objective for Joining Rotary: _____

Employer/Business Details:

Business Name & Address: _____

Phone: _____ Mobile: _____ E-Mail: _____

Position: _____

Community Service:

Experience & Activities: _____

Family Details:

Spouse/Partner: _____ Date of Birth: _____

Family Members: _____

Declaration & Signing:

I understand that the information provided above will be circulated to the Board of Rotary Hamilton Central for the purposes of determining whether I will be invited to join Rotary Hamilton Central and on acceptance of becoming a member I will also be member of Rotary International. My information may be used for legitimate Rotary purposes.

Signed: _____ Date: _____

Sponsoring Rotarian:

Based on the Rotary 4 Way Test, I _____ believe that _____
is a person of good character and reputation and that they should be accepted as a member of Rotary Hamilton Central.

Signed: _____ Date: _____

Rotary Hamilton Central Board Approval:

For Board approval, deliver to the Secretary for consideration by the Board. The Board meet monthly at the beginning of the month, except January. Or Post To:

The Secretary
Rotary Hamilton Central
PO Box 694
HAMILTON 3240

Board Approved: _____ Date: _____

Signed By: _____