

ROTARY CLUB OF ST. SIMONS ISLAND

ROTARY MEMBERSHIP APPLICATION

Please complete all items. Please Print.
When complete return to Presenting Sponsor

Date:				
Title, First Na	me, MI, Last Name, S	uffix		
Nickname (to	be used on your memb	pership badge)		
Birthdate		Gender		
Preferred E-M	ail			
Phone:	Home	Cell	Work	
Mailing Addre	ess			
Business		Position/Title		
Business Addr	ress			
Spouse/Partner	r: First Name, MI, Las	t Name, Suffix		
Spouse's Nick	name	Anni	Anniversary Date	
Is your spouse	a Rotarian: YES	NO		

PREVIOUS ROTARY EXPERIENCE: Club Name Rotary ID Number City/State Date Joined Date Resigned Club Participation/Achievements: Personal and Professional Bio (Attach additional sheet if necessary) Degrees: Community Leadership (Community organizations you are involved with, projects, organizations) Hobbies and Interests