

Rotary



Rotary Club of Livingston Parish

Membership Application Form

Proposal for Membership of Rotary Club

Personal Information				
Name:			Date:	
Address:		City:	ST	ZIP
Home Phone:		Cell Phone:		
What is your Date of Birth: (Year not published)		Home Email:		
Family Information				
Your Spouse or Partner's Name:		Their Date of Birth: (Year not published)		
Please list all children at home under the age of 18 years old.				
Business Information				
Business Name:		Title:		
Business Address:		City:	ST	ZIP
Business Phone:		Business Email:		
Previous Rotary Club Membership:				
Member ID: (if known)		Years as Member:		
Short Bio				

I hereby certify that if accepted to membership of the Rotary Club of Livingston Parish, 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 dues in accordance with the bylaws of the club.

Signature: _____ Date: _____

Proposed Member Nominated/Sponsored by:	Club Leadership Approval Date:
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