

NEW MEMBER PROPOSAL

APPLICANT: Complete this form and E-Mail it to Membership Committee.
Please print legibly.

PROPOSED MEMBER INFORMATION: Date: _____

Title (e.g. Mr., Ms., Mrs., Dr., Rev., etc.): _____ Suffix (e.g. Jr., Sr., III): _____

Family Name: _____

First Name: _____ Middle Name or Initial: _____

Current Employer (or former if retired): _____

Current Position (or former if retired): _____

Home Phone: _____ Business Phone: _____

Home E-mail: _____ Business E-mail: _____

Address Home Business

Street: _____ Street: _____

City: _____ City: _____

State: _____ Zip-code: _____ State: _____ Zip-code: _____

If a transferring or former Rotarian, list previous Club information:

Club Name: _____ Dates: _____

Club Name: _____ Dates: _____
From to

If a Rotary International Program or Foundation Alumnus/a, list program(s) and date(s):

Activities that would enhance your consideration as a Rotarian: _____

Name of Club Member who will serve as proposer (if any): _____

Other members of the Rotary Club of West Chester that know you: _____

Please include any additional information or comments below: _____

