

**MEMBERSHIP APPLICATION / BACKGROUND**

This is an application for membership to the Parkway West Rotary Club. It is to be completed after the proposed member has been approved by the Membership Committee and Board of Directors. Please print.

FULL NAME \_\_\_\_\_

NICKNAME \_\_\_\_\_

CLASSIFICATION / BUSINESS CATEGORY \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ BUSINESS ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME OF BUSINESS OR EMPLOYER \_\_\_\_\_

YOUR TITLE OR POSITION \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_ NUMBER OF CHILDREN \_\_\_\_\_

HOMETOWN \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ ANNIVERSARY DATE \_\_\_\_\_

COLLEGE \_\_\_\_\_

HOBBIES \_\_\_\_\_

OTHER ORGANIZATIONS / CLUBS \_\_\_\_\_

ROTARY INFORMATION TO BE SENT TO \_\_\_ HOME \_\_\_ WORK

Please fill in the above information and return it to the Membership Committee as soon as possible. Soon you may be properly introduced and listed correctly in our Rotary's directory.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SPONSOR \_\_\_\_\_ INDUCTION DATE \_\_\_\_\_

Please check: Rotary expenses paid by: \_\_\_ Individual \_\_\_ Company