



## Lodi Rotary Club 583

### District 5220

#### Membership Proposal Form (Please print)

(Mr) (Mrs) (Dr) (Rev): LN \_\_\_\_\_ FN \_\_\_\_\_ MI \_\_\_\_\_

Current/ Former Firm/ Business/ Employment: \_\_\_\_\_

Address: \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone Home: ( ) - \_\_\_\_ - \_\_\_\_\_ Cell ( ) - \_\_\_\_ - \_\_\_\_\_

Preferred email: work \_\_\_\_\_ home \_\_\_\_\_

Membership Type Circle:            Active            Satellite            Honorary

Previously a Rotarian (Yes) (No) Dates: \_\_\_\_\_ to \_\_\_\_\_

Rotary International ID Number \_\_\_\_\_ Paul Harris (Yes) (No) \_\_\_\_\_

Transferring from another club (Yes) ( No) Name of Club \_\_\_\_\_ District \_\_\_\_\_

Nominated by: \_\_\_\_\_ Ph: \_\_\_\_\_

Email: \_\_\_\_\_

Reason for joining: \_\_\_\_\_

Interested in the following (place an x by each item)

<input type="checkbox"/>	President	<input type="checkbox"/>	Community Projects
<input type="checkbox"/>	Secretary	<input type="checkbox"/>	Global Grants
<input type="checkbox"/>	Treasurer	<input type="checkbox"/>	Peace
<input type="checkbox"/>	Social Media	<input type="checkbox"/>	Health issues (mothers, children)
<input type="checkbox"/>	Public Relations	<input type="checkbox"/>	Water initiatives
<input type="checkbox"/>	Membership	<input type="checkbox"/>	Education and literacy

Return to Club Secretary or mail to Lodi Rotary P.O. Box 821, Lodi, CA 95241