## Membership Application



www.statecollegerotary.org

## Please Submit to Membership Chair or Board Member

Full Name:		
Current (or former) firm and position	on:	
Mailing address:		
Telephone	Birth D	Date:
Residence:		
Business:		
Cellular/Other:		
Preferred e-mail address:		
Proposed classification:		
If rejoining or a former Rotarian, lis	t more recent club informa	tion:
Previous Club Name:		
Dates:		
Rotary ID number (if known	n):	_
Activities that would enhance cons	ideration as a Rotarian:	
Proposer	Signature	Date

Please submit \$25 fee payable to "State College Rotary Club" with the application.

