

## **Rotary Club of Bonners Ferry Family Membership Application**

We apply for family membership in the Rotary Club of Bonners Ferry and authorize our consideration by the Board of Directors. If approved, we authorize publication of our names and family members in the Bonners Ferry Rotary Club's newsletter for consideration by the club membership. We agree to abide by the requirements of membership. Primary Family Member will receive the bill for all members and agrees pay the invoice promptly upon acceptance. If a family member moves away or information changes on the Family Account, it is the responsibility of the Primary Family Member to inform the club and withdraw/apply for Additional Family Members.

## **Part** A (to be completed by proposer or applicant and returned to the club Secretary)

Company or Firm Name:			
Business Address:			
City/State/Zip:		Website Address:	
Primary Family Member	Additional Fami	ly Member:	
Name:		Title:	
Nickname:		Spouse Name:	
Business Phone:	Fax:	E-mail:	
Home Address:			
Home City/State/Zip:		Home Phone:	
Home E-mail:		Alma Mater:	
Date of birth: M D	Y	Anniversary M D	ť

## **Part B** (to be completed by proposed member after board approval)

I hereby certify that I am qualified for active membership by my current or former status as a business, professional, or community leader, or as a Rotary Foundation alumnus/a, and by having a place of business or residence within the club's locality or surrounding area.

I understand that, if accepted for membership, it will be my duty to exemplify the Object of Rotary in all my daily contacts and activities and to abide by the constitutional documents of Rotary International and the club. I agree to pay any admission fees required by the club and to pay annual dues in accordance with the club bylaws. I hereby give my permission to the club to publish my name and proposed classification, if applicable, to its membership.

Signature

Date

## $Part \ C \ ({\rm to \ be \ completed \ by \ a \ Club \ Officer})$

Classification:			
If member is a former Rotarian, provide previous club and district	t information:		
Club Name:	District number	:	
Club ID number*:	Dates: to	from	
Rotary membership ID number*:			
*if unsure of number, contact your Club and District Support representative. Find	contact information at ww	w.rotary.org.	
If an RI program participant or Foundation alumnus/a, program(s	) and date(s):		
Mentor assigned to assist with orientation:			

Rotary Magazine Subscription: The Rota	rian Rotary regional magazine
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Action on Proposal Date	
Received by Secretary:	
Former Rotary Club contacted (if former Rotarian):	
In good standing Not in good standing	
Submitted to membership committee:	_
Committee decision received:	
Approved Disapproved	
Submitted to board:	
Board decision received:	
Approved Disapproved	
Proposed to club:	
(if any objection has been filed, the board should address the iss	ue a
its next meeting.)	
Signed form received from proposed:	
Admitted to membership:	
Entered into Member Access:	_