



Rotary Club of State College/Downtown

Membership Application/Proposal Form

www.downtownstatecollegerotary.org

Please Submit to Membership Committee

Title: _____ Full name: _____

Current (or former) firm and position: _____

Mailing address: _____

Telephone

Birth Date: _____

Residence: _____

Business: _____

Cellular/Other: _____

Preferred e-mail address: _____ Residence Business

Proposed classification: _____

If rejoining or a former Rotarian, list most recent club information:

Previous club name: _____

Dates: _____

Recent Rotarian (one year or less): Yes No

If an RI program participant or Foundation alumnus/a, list program(s) and date(s):

Activities that would enhance consideration as a Rotarian: _____

Date of Two Club Meetings Attended _____

Proposer

Signature

Date