

ROTARY CLUB OF_____

MEMBER INFORMATION FOR DaCdb SYSTEM

PERSONAL FACTS FOR ROTARY CLUB DATABASE

Members are asked to complete the information requested below. Starred items (*) are essential fields
After completing this form, you can SAVE it in your computer; PRINT it, or E--mail it as an Attachment.

Please return this form to the club secretary.

Member:	*Title	*First Na	ime			MI:
Date of Birth: _				sse which is your pr	eferred mailing ac	ldress_
<u>sesidence</u> <u>Address</u>	Street					
	City Phone:			State Fax:	Zip	
ddress	Street					
	City Phone:			State Fax:	Zip	
BUSINESS:	Company:					
ccupation / Jol	o Title:					
hone:	Ext: Fax: Cell Phone:					
usiness ddress	Street					
	City			State	Zip	<u> </u>
ostal Box ddress	Box Number		City		State	Zip
CLUB:				out by club secre	<u>tary</u>	
	w: Yes:	No: If ye	s, which Rota	Active – Leave o ry year?/_ me		Honorary:

FAMILY:				
Spouse or Significant Other	*Date of Birth/		*Last Name:	
	mes (s):	M	Date of Birth//	
PREVIOUS	ROTARY CLUBS:	*Rotary	ID number	
Name of Club:		City/State	Date Joined:	Date Resigned:
Name of Club:		City/State	Date Joined:	Date Resigned:
OBBIES 8	& INTERESTS: i.e.:	golf, fishing, and hunting		
NOTES: i.e	e.: Community positions,	projects, organizations, s	ubjects you could give a 30 minu	te talk to the club.