



**APPLICATION FOR MEMBERSHIP
Martin Rotary Club**

NAME: _____

SPOUSE'S NAME: _____ # OF CHILDREN: _____

CHILDREN'S NAMES: _____

DATE OF BIRTH: _____ PLACE: _____

EMPLOYER: _____

OCCUPATION: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ HOME PHONE: _____

HOME ADDRESS: _____

E-MAIL ADDRESS: _____ FAX NUMBER: _____

SPONSORING ROTARIAN(S): _____

ARE YOU A FORMER MEMBER OF ROTARY? Y/N

CITY/STATE: _____ FOR HOW LONG: _____

For Administrative Use Only

1ST READING: _____ 2ND READING: _____

DATE ACCEPTED: _____ CLASSIFICATION: _____

MEMBERSHIP CHAIRMAN: _____

PRESIDENT: _____

Martin Rotary and Rotary International – Placing *Service Above Self*