

Rotary Club of Marco Island Noontime

New Member Application

Name:	Rotary ID#	
Prefer to be Called:	Preferred Ema	il
Preferred Cell Phone	Cell Pro	ovider
Name of Club Member who in	troduced you to our club	
Occupation (If retired, comple	te & note "Retired" after Title	2)
Employer		
Business Address:		
		Cell:
Home Address:		
Summer Address (if different)	:	
Name of Spouse:		Anniversary
Children's Names & Ages:		
Candidate Signature:		Date:
Board Approval On:		



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P. 2- New Member Applicant Name	Rotary ID#
PAST ROTARY SERVICE (If any): Clubs & Dates:	
Service (Office Positions, Board Member, Chair, Committees, Projects in	nvolved in)
Past Rotary Awards (If any): (Example: Paul Harris, Rotarian of the Year Award)	
BIO/DESCRIPTION: (Personal and professional background- you may a	add separate page if you wish
HOBBIES and INTERESTS:	
COMMUNITY LEADERSHIP, VOLUNTEER WORK, ORGANIZATIONS	and OTHER COMMENTS: