

MEMBERSHIP APPLICATION

Sponsor and Proposed Member to complete & return to columbiarotary@capconsc.com.

Sponsor : _____

Proposed Member: _____ DOB: _____

Spouse: _____

Phone Number: _____ E-Mail: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____ Title: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

If rejoining, or a former Rotarian, list Previous Club Name:

Dates of membership: _____

Education: (List institution, degree, and city/state)

Service Interests (check all that apply):

- Community Service
- Fellowship Events
- Membership
- Public Relations
- Programs

Brief Biography/Leadership and Community Activities:

Personal Interests/Hobbies: Family:

Proposed Member's Signature _____ Date _____

Please note that as a candidate for membership, a SLED sex offender registry check will be performed.