



PolioPlus Society Membership Form

As a Rotarian and supporter of Polio Eradication, Rotary’s # 1 priority, I wish to participate in this humanitarian endeavor as a member of the PolioPlus Society.

Therefore, I hereby commit to making an annual donation to the PolioPlus program of The Rotary Foundation as follows: (select one)

- \$100 per year (minimum amount to become a PolioPlus Society member)
- A contribution of \$_____ per year to PolioPlus (more than \$100)

Society members will receive a PolioPlus Society membership certificate and pin and Paul Harris credit.

Make your donations online at www.rotary.org/donate and select the Polio Fund or through your Rotary Clubs. If you make your donation online, you can set it up as a recurring donation.

POLIOPLUS SOCIETY MEMBERSHIP

I pledge to contribute at least \$100 each year until the World Health Organization certifies that Polio has been fully eradicated and the world is polio-free. I do this because

UNTIL THE LAST CHILD IS IMMUNIZED AND THE WORLD IS CERTIFIED POLIO-FREE, EVERY CHILD IS AT RISK

Name: _____

Signature: _____

Date: _____

Rotary Club of _____

Phone # _____

Email: _____

PolioPlus Society membership materials will be mailed to your Rotary Club President for presentation at a Rotary Club meeting. We want you to be properly recognized for your commitment to polio eradication.

Return completed form to: rotary6200@lusfiber.net or P O Box 54004, Lafayette, LA 70505

