

PORT TOWNSEND SUNRISE ROTARY MEMBERSHIP PROPOSAL FORM

I PROPOSE:			
Full Name		Nickname	
D0B:	Significant Other:		
Mailing address:			
Telephone:			
Home:	Cell:	Work:	_
Email:			
Primary:	Se	econdary;	
Proposed Classification:			-
If Rejoining, or a former	Rotarian, list most recent	t Rotary Information:	
Previous club name:		RI Number:	
Dates (from/to, approx.)			
Former Interact, or Rota	ract? If so, provide detail	ls:	
Former RI program parti	cipant or Foundation alu	mnus/a, list programs and approx. dates:	
Activities and/or interest	ts that would enhance co	nsideration as a Rotarian:	
What Rotary programs a	re you most aware of, an	nd would be most interesting to you?	
Proposer's signature		Date	
			- / 4 0 / 2 0 2 4