If you have access to the Internet, membership changes can be reported through <u>Member Access</u> at www.rotary.org instead of using this form.

This form can be used to report new or terminating members or membership information changes to RI. Use a separate form for each member. Please print legibly or download this form at www.rotary.org to fill it out electronically. Send one copy to your district governor, keep a copy for your club files, and send the original form to:

ROTARY INTER	NATIONA	AL, 1560 Sherman Avenue, Evansto	on, IL 60201-369	8, USA Fax : (847)	733-9340 E-mail : data@rotary.org	
Rotary Club of		District				
Member Name		STATE/PROVINCE				
Rotary Member II) #*	FIRST asferring members. All new membe	MIDDLE IN			
Member Mailing	_	8	1			
Weinber Waring Address		NUMBER AND STREET	CITY			
		STATE/PROVINCE		COUNTRY	POSTAL CODE	
PLEASE CHEC	K THE A	PPROPIRATE BOX BELOW:				
☐ NEW MEMB	ER			DATE OF ADMISSION	N	
		MM/DD/YY				
☐ Male ☐ Fem	nale			Active member	er Honorary member	
Transferring mem	ber? 🗌 No	Yes. If yes, provide member	ID# above.	Past RI Direct	tor Past District Governor	
Former Rotary Clu	ub of	STATE/PROVING	OF /	NOI INTERNA	District	
	_			COUNTRY		
		Occupation* and Occupational Codes on the RI	*: Web site or with	the Semiannual Report.		
		rian OR Rotary regional mag		-		
Former Rotary Fo	undation A	llumnus? No Yes. If yes, v	which program(s)	? Ambassadorial Scho	olarship Group Study Exchange	
-		sity Teachers				
☐ CHANGE OF ADDRESS			DATE OF CHANGE			
Old Mailing Address:			New Mailing Address:			
NUMBER AND ST	REET	CITY	NUMBER	AND STREET	CITY	
STATE/PROVINCE	Ξ	COUNTRY	STATE/PR	OVINCE	COUNTRY	
POSTAL CODE			POSTAL O	POSTAL CODE		
☐ CHANGE OF	NAME					
_	F	FORMER NAME		NEW NAME		
☐ CHANGE MI	EMBERSI	HIP TYPE TO: Active Ho	onorary			
☐ MEMBERS	HIP TER	RMINATED		DATE OF TERMINA	ATION	
Reason Class Busi None *** If reason for te	for Termi sification (ness pressu e Given (9) ermination	nation (check one): 1)	se specify:se use the Membe] Moved***(3)] Health / Personal (7) ership Referral form to no	MM/DD/YY Attendance (4) Deceased (8) Joined other club (12) otify appropriate Rotary clubs of a forme	
CLUB S	SECRETA	RY (PRINT NAME) SIG	NATURE OF C	LUB SECRETARY	MM/DD/YY	