

Individual Membership APPLICATION



Club of
Brownsville
Sunrise
D5930

To apply for membership, please complete all questions.

Nominee Name:

DATE OF BIRTH:

AGE:

YEARS IN
BROWNSVILLE

Company/Job Information

Company Name:

Principal Address:

Position/Title:

Business Phone:

Years in the company:

Email:

Personal Information

Residence:

Cell Phone #:

Email Address:

Please list civic, professional, service social organization, activity affiliations and office held:

Partner Name:

Name of Children:

Rotary Information. Complete by sponsor:

Current/Former Member:

Club Name:

Membership Years:

Rotarians Who Know the Nominee:

Why is the Nominee a good candidate for the Rotary Club of Brownsville Sunrise?

Sponsor:

Relationship:

Financial Commitments: Annual Dues \$350.00 Family Membership: \$250.00

Photo Image Release:

I hereby grant permission to the Rotary club of Brownsville Sunrise to use photographs, image and/or video of me in publications, new releases, online and in other communication related to the mission of Rotary Club of Brownsville Sunrise.

Signature:

Date: