



ROTARY CLUB OF NOVATO SUNRISE

P.O. BOX 356, NOVATO, CA 94948

Membership Application

(Please type or legibly print and return to your Sponsor)



I am applying for membership in (check one): Breakfast Club Evening Club

First Name _____ Middle Name (or initial) _____ Last Name _____

Nickname/Call Name _____ Date of Birth _____

Your Firm or Employer _____ Retired Yes No

Your Business Title or Occupation _____

Firm/Employer Address _____

Type of Business _____

E-Mail Address _____

Home Phone _____ Mobile Phone _____ Business Phone _____

Residence Address _____

Spouse/Partner _____ Date of Birth _____

Children – Names & Ages _____

Colleges/Universities Attended _____

Military Service _____

If previously a Rotarian, what club(s) and when? _____

Other Business/Civic/Social Organizations _____

Foreign Languages Spoken/Read _____

Hobbies _____

SPONSOR _____ DATE _____ SPONSOR SIGNATURE _____

APPLICANT SIGNATURE* _____ DATE _____

*Note: Applicant's signature authorizes the RCNS Club Secretary, upon approval of applicant's membership by the RCNS Club Board and notification of applicant of this approval, to publish the applicant's name and qualifications to all active members.