



**Warwick Valley Rotary Club  
Perspective Member Application**

**PERSONAL**

Name: First \_\_\_\_\_ Last \_\_\_\_\_ Title \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Spouse/Partner Name: First \_\_\_\_\_ Last \_\_\_\_\_ Anniversary: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**PROFESSIONAL**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Position / Title: \_\_\_\_\_ WVRC Badge Title: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Activities which would enhance consideration as a Rotarian: \_\_\_\_\_

\_\_\_\_\_

Prior Experience with Professional Organizations / Fundraisers: \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**TO BE COMPLETED BY SPONSOR:**

Sponsor Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ How long have you known Applicant: \_\_\_\_\_

Describe why you feel Applicant would be a good addition to WVRC: \_\_\_\_\_

**FOR OFFICIAL USE:**

Attended 2 meeting minimum required as guest: Yes No Dates: \_\_\_\_/\_\_\_\_/\_\_\_\_ & \_\_\_\_/\_\_\_\_/\_\_\_\_

Board Voted: Yes No Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Orientation Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Induction Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Entered in CR and Attendance Roster: \_\_\_\_/\_\_\_\_/\_\_\_\_

Badge Ordered Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Reviewed by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_