



EUREKA SPRINGS ROTARY CLUB

Membership Proposal Form: may be mailed to PO Box 686, Eureka Springs

(to be completed by proposed new member, signed by sponsor and returned to the club secretary)

Title (e.g., Mr., Ms., Mrs., Dr., Rev.): _____ Suffix (e.g., Jr., Sr., III): _____

Last Name: _____

First name: _____ Middle name: _____

Address: _____

Current (or former) firm and position: _____

Telephone (including country/city or area codes) Fax (including country/city or area code)

Residence: _____

Business: _____

Cellular/Other: _____

E-mail Address: _____

Preferred e-mail address: Residence Business

Membership Type (check one) Active Honorary

Have you belonged to Rotary in the past? If so, please list previous club information:

Name: _____ Name: _____

Dates: _____ Dates: _____
From To From To

If an RI program participant or Foundation alumnus/a, list program(s) and date(s):

Activities that would enhance consideration as a Rotarian _____

Sponsor's Signature: _____

Member proposal brought to Board: _____ Member proposal announced to club: _____

New member orientation: _____ New member induction: _____

Member number from RI: _____