



ROTARY CLUB OF ABBEVILLE MEMBER INFORMATION			
Name:		Preferred Email:	
Date of birth:	Phone:	Cell:	
Current address:			
City:	State:	ZIP Code:	
EMPLOYMENT OR FORMER EMPLOYMENT INFORMATION			
Employer:			
Employer address:			
City:	State:	Zip:	Bus Phone:
Fax:	Bus E-mail:		
Currently Employed:	<input type="checkbox"/>	Retired:	<input type="checkbox"/>
SPOUSE INFORMATION			
Name:			
Date of birth <u>MM-DD-YYY</u> :		Anniversary Date <u>MM-DD-YYY</u> :	
SIGNATURES			
Signature of Club Member:			Date:

To Be Completed by Club President or Club Secretary	
Sponsor: _____	Date Inducted: _____
Classification: _____	
Member ID#: _____	Apparitio PW: _____

