

Please print

(DATA NOT INCLUDED IN MEMBERSHIP LIST)

Title	First Name	M.I.	Surname
Mr. / Ms.			
Address			
City			
State / Prov.			
Country			
Postal Code			
Admission Date / Subscription	TR <input type="checkbox"/> RR <input type="checkbox"/> ORM <input type="checkbox"/> Previously Reported? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupational Codes			
Language Codes			
Kind of Member (choose one)	Active <input type="checkbox"/>	Honorary <input type="checkbox"/>	Special Subscription <input type="checkbox"/>
Name of Former Rotary Club			
Former Rotary Foundation Alumnus?	If yes, what program:		

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