

CHARTER LIST

Copy this page for each member. You need a minimum of 20 charter members.
Please type or print clearly.

Title (Mr., Ms., Mrs., Dr., Rev., etc.) _____ Suffix (Jr., Sr., III, etc.) _____

Family name _____

First name _____ Middle name _____

Gender: Male Female

Date of birth _____

Were you a former Rotarian or are you a current member of another Rotary club: No Yes

Current members should not terminate in their existing club as their changes will be reflected as soon as the new club is admitted to Rotary.

If yes, RI membership ID number _____

Name of former/current club _____

Are you a Rotary alumnus/alumnae? No Yes

Alumni are former participants in Interact, Rotaract, Youth Exchange, RYLA, Rotary Peace Fellowships, Scholarships, vocational training teams, and Group Study Exchange.

Your job title _____

Name of your business or organization _____

Email _____

Preferred phone (including country/city/area codes) _____

Alternate phone _____

Preferred mailing address* (check one): Residence Business Other _____

**If this is a post office box, please provide an alternate address for courier delivery.*

Alternate address (complete only if mailing address is a PO box): Residence Business Other

Magazine — Select one: The Rotarian (print) The Rotarian (digital) Rotary regional magazine