



ROTARY INTERNATIONAL



CLAREMORE REVEILLE

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Proposed New Member Information

Name: _____

Home Address: _____

Home Phone Numbers: Regular _____
Cell _____

Home E-mail address: _____

Home Facsimile: _____

BUSINESS DETAILS

Occupation: _____

Business Name: _____

Position: _____

Business Address: _____

Business Phone Numbers: Regular _____
Cell _____

Business E-mail address: _____

Business Facsimile: _____

OTHER PERSONAL DATA

Nickname: _____ Gender: **M** **F** (circle one) **DOB**(Month & Day only): _____

Degrees/Diplomas(including name of school): _____

Spouse name: _____ **DOB**(Month & Day only): _____

Anniversary Date: _____

Children: _____

Sponsor: _____ Proposed Classification: _____