

Rotary Club of Wauwatosa

Member Information Sheet

Members are requested to complete this form and return it to:

Mail: Rotary Club of Wauwatosa, 910 Satinwood Ct., Brookfield, WI 53005

or

Fax: 262-796-8233

NAME: Title _____ First Name _____ Middle Name _____
Last Name _____ Suffix _____
Nickname/Call Name _____ Male Female

ADDRESS: Home Address _____
City _____ State _____ Zip Code _____
High School district you reside in _____

Business Address _____
City _____ State _____ Zip Code _____

Other/Vacation Address _____
City _____ State _____ Zip Code _____

Send Correspondence To:

Home Address

Business Address

Other Address

Send Correspondence By:

Letter

Fax

E-mail

Send Invoice For Dues To:

Home Address

Business Address

E-mail

The club's weekly newsletter, *Rotations*, is sent via e-mail, unless otherwise notified by the member. In such case, the newsletter will be mailed.

Do not send the newsletter by e-mail.

Please mail it to my home address business address other address, as written above.

PHONE:

Home _____

Assistant _____

Business _____

Mobile _____

Other _____

FAX:

Preferred fax (check one)

Home _____

Business _____

Other _____

E-MAIL:

Preferred e-mail (check one)

Home _____

Business _____

Other _____

COMPANY

WEBSITE

ADDRESS: _____

BUSINESS DETAILS:

Company Name _____

Company's Principal Activity _____

Occupation _____

Title/Position _____

RETIRED (If yes, please include Company Name and Title/Position at time of retirement.)

PERSONAL DETAILS:

Date of Birth (mm/dd/yy) _____

Degrees/Diplomas _____

Rotary Achievements (e.g. Past District Governor (1988/1989), Paul Harris Fellow (1999), etc.)

Achievement	Rotary Year Achieved
_____	_____
_____	_____
_____	_____
_____	_____

Previous Membership in Rotary/Other Clubs

Club Name	Date From	Date To
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Miscellaneous Achievements (Community positions, Special projects, Interests and Hobbies)

FAMILY DETAILS:

Spouse First Name _____ Last Name _____

Date of Birth mm/dd/yy) _____ Anniversary (mm/dd/yy) _____

Spouse is Rotarian? Spouse's Rotary Club Name _____

Children	Gender	Date of Birth (mm/dd/yy)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CLUB DETAILS: (to be completed by office)

Badge # _____

Member Type Honorary Active-Ordinary Active-Exempt

Date Joined _____

Classification Header Sub

Sponsor's Name _____

RI Official Classification _____