ROTARACT CLUB OF RENO

Friend of Rotaract Application

Name: _____
Last First Middle

Date of Birth: _____ E-mail Address: _____

Home Address: _____

Home Phone: _____ Home Fax: _____

Cell Phone: _____ Work Address: _____

Work Phone: _____ Work Fax: _____

Occupational Classification: _____

Additional info:

1. You will be invited via email to attend the club's socials, professional development meetings, service activities, and Rotary sponsored events each year (July 1 to June 30).

2. Are you willing to pay annual member dues of $100?
   □ Yes □ No

3. Are you a current Rotarian and if so, which club?_____
   □ Yes □ No

I understand and accept the principles of Rotaract as expressed in its purpose and objectives and agree to comply with and be bound by the Standard Rotaract Club Constitution, Rotaract Statement of Policy, and By-Laws of the club.

Signature_____ Date_____

For internal Rotaract use only:
Received on:_____By: _____
Rotaract club Secretary should retain this form for club records.