

MORNING ROTARY CLUB OF BAY CITY, MI

Proposed Candidate Information Sheet

Name _____ Nickname _____

Home Address _____ Home Phone _____

_____ Business Phone _____

Date of Birth _____ Fax _____

Spouse's Name _____ E-mail _____

Name & address of Firm, Company or Institution: _____

Principal Business or Activity _____

Suggested Classification with Rotary _____

Has the Candidate ever been a member of Rotary? _____ If yes, where? _____

Has the Candidate ever been a member of any other service clubs? _____ When? _____

Has the Candidate been a guest at our meetings? _____

Has the Candidate expressed an interest in becoming a member of Rotary? _____

Could the Candidate meet our attendance requirements? _____

Principal Activities of Candidate: _____

Names of other Rotary members who know this Candidate _____

Does any other Rotary Member endorse this proposal? _____

Additional comments: _____

Date: _____ Proposer: _____

To be completed by Secretary:

Application received _____

Sent to Classification Committee: _____

Sent to Membership Committee: _____

To Board of Directors: _____

Date Proposer Notified: _____

Returned: _____

Returned: _____

Action of Board: _____

Effective Membership Date: _____