

MEMBERSHIP APPLICATION

First name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address (city, state, postal code)

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Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotary association \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ex. RYLA, Rotaract, Interact, RYE, Ambassadorial Scholar, GSE, Miller Grant, University Teacher Grant, World Peace Scholar, Peace & Conflict Studies, Volunteer Service Grant

Position/role in program, if applicable

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Sponsoring Rotary club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Are you 18 years of age or younger? Yes \_\_\_\_ No \_\_\_\_

If you answered "yes" to the question above, follow the instructions below.

Have your parent or guardian email a written permission for you to join the Rotary Alumni Association. The email must be sent from the parent’s or guardian’s personal email address to: alumni@rotary6970.org or it may be sent to the Rotary Alumni Association, 2970 St. Johns Ave., Jacksonville, FL 32205.

READ BEFORE SUBMITTING THIS APPLICATION

By providing this information Alumni Association members consent to being contacted by Rotary International and having their information shared with Rotarians.

EMAIL THIS APPLICATION TO: **alumni@rotary6970.org**