

MEMBERSHIP APPLICATION

First name _____ Last name _____

Mailing address (city, state, postal code)

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

Sponsoring Rotary club _____

Additional comments _____

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**