



Membership Application

The Rotary Club of Bryn Mawr, PA USA

www.brynmawrrotary.org

New Member Application Form

Personal Information *(To be completed by Applicant)*

Prospective Member Name: _____

Business

Business Name/Former employer (ret.): _____

Position or Title: _____

Business Address: _____

Business Telephone Number: _____

Fax Number: _____

Email: _____

Residence

Residence Address: _____

Residence Telephone Number: _____

Fax Number: _____

Email: _____

Were you previously a Rotarian?

- Yes Club(s) name: _____ from: _____ to: _____
RI ID# _____
- No

Sponsor *(To be completed by Sponsoring Rotarian)*

Sponsoring Rotarian must be a member in good standing of the Rotary Club of Bryn Mawr and has known the potential member for some time. .

Sponsor's name, please print: _____

Are you committed to ensuring that the applicant remains an engaged, active member of the club?

Sponsor's Signature: _____

Date: _____