



Membership Application Form

Please complete the form below and send via email or post

Proposer's Details

Name : _____

Home Address : _____

Business Address : _____

Mobile : _____ Home Ph : _____

Business Ph : _____ Date of Birth : _____

Email : _____

Professional Qualifications : _____

Personal Interests : _____

Are you a past member of Rotary? (Yes / No) _____

Club Name : _____ Years / Dates : _____

Position(s) : _____

I certify that if accepted to Membership of the Rotary Club of Kingscliff Inc that I, as a Rotarian, will exemplify the Object of Rotary in all my daily contacts and will abide by the constitutions of Rotary International and the Club.

I agree to pay annual dues of \$260 which are billed half-yearly, in January and July.

Signature  : _____ Date : _____

For Office Use Only

Nominated by : _____ Signature : _____

Board approval on : _____