

NEW MEMBER ENROLLMENT



Top portion must be completed by club officer before mailing

_____ Exchange Club of _____ State _____ Club # _____

Club Officer's Signature _____ Title _____ Date _____

Type: New Member Reinstatement Change of Classification Transfer (From club # _____)

Classification: Active Active Honorary At-Large Life Honorary Active Military Business Associate

I hereby qualify as a member of the Exchange Club and shall be granted all the rights and privileges of membership.
I agree to adhere to all club rules, regulations and policies.

(Please Print)

Business Name _____

(If Business membership)

Name _____ M F Nickname _____
(First) (M.I.) (Last)

Spouse _____ Nickname _____
(First) (M.I.) (Last)

Address _____ City _____ State ____ Zip _____ - _____

Home Phone _____ / _____ - _____ Business _____ / _____ - _____ Cell _____ / _____ - _____

Fax _____ / _____ - _____ Profession _____ Date of Birth _____
(Month/Day/Year)

E-mail _____ Member's Signature _____

Sponsor _____ Sponsor's Club _____