

Membership Application



I hereby make application in the United SERTOMA Club. This application is accompanied with a remittance of \$25 in payment of the membership application fee and \$ _____ covering local Club dues in advance to _____ 20 ____ .
I accept and subscribe to the provisions of the Club Constitution and By-Laws.

Applicant Information:

Last Name: _____ First Name: _____ MI: _____

Select One: Mr. Mrs. Ms.

Business Name: _____ Title: _____

Phone (Home): _____ Phone (Business): _____

Phone (Cell): _____ Phone (Fax): _____

Email: _____

Please send correspondence to my: Business Residence

Business Address: _____ City: _____ State: _____ Zip Code: _____

Residential Address: _____ City: _____ State: _____ Zip Code: _____

Applicant Date of Birth (MM/DD/YYYY): _____ Spouse: _____

Do you belong to any other Service Clubs? Yes No If yes, state name: _____

Date of Application: _____ Applicant Signature: _____

For Office Use Only:

<i>Type of Membership</i>	
<input type="checkbox"/> Regular (\$250)	\$ _____
<input type="checkbox"/> Young Leaders (Ages 21-35) (\$125)	\$ _____
Application Fee	\$ 25
Total	\$ _____
Shirt Size: S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/>	

This application is recommended by:

Sertoman: _____ Date: _____

Approved by Classification and/or Membership Committee (if applicable)

Approved by Club Boards of Directors

Date: _____ Signed: _____

(Secretary)