ROTARY CLUB OF Ibadan-JERICHO METRO – MEMBERS DATA FORM

NAME/TITLE		
Last Name:	First Name:	Middle Name:
Suffix (Jr., Sr., III, e	tc.):Title (Mr., Mrs., N	ls., Dr., etc.): Nickname:
PREFERRED MAILIN	NG ADDRESS FOR CLUB PL	JRPOSES
Address:		
City:	State:	Zip (+4 if known):
	ERS AND EMAIL ADDRESS	=
		rk phone:
Email address:		
		Will Complete Items Marked with Asterisks) or membership:
* Date joined this of		" membersnip
-		Member type: Active OR Honorary
		_ // /
Previous Rotary Clu	ub(s) to Which You Belon	ged Date Joined Date Terminated
		_ // //
		_ // // _ // // _ // //
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De et Deterre Astiviti		
1997-98)	les (offices held, committee mei	mberships, Paul Harris Fellowships, etc.) Years (e.g.,

HOME ADDRESS

Address:_____

City:	State:	Zip (if known):
EMPLOYMENT		
Job Title:	Name of Bu	siness:
 City:	State:	Zip (if known):
PERSONAL INFO	RMATION	
Your Birth Date	needed for club statistical	purposes): / /
	ame:	
Wedding Annive Children's Name	rsary Date: / / s: (OPTIONAL)	
Your Hobbies/In	terests:	······
Signature:		
Date This Form \	Nas Completed: /	/