

Membership Information Form

Club #: Club Name:	
District: Region:	
Signature of individual completing form:	Date:
Add Member Delete Member Add Member Delete Member Image: Life Member Deceased Corporate Member Moved New Member Non-Payment of Dues Rejoining Club Other Transfer Member Vertical State	Change Member Information Member ID#
Dr. Mr. Mrs. Ms. Miss	Nickname
Preferred Mailing Address: Home Work	Old Information
Street Address	
City, State, Zip	
Home Phone	
Email Address	
Employer	
Job Title	
Work Address	
City, State, Zip	
Work Phone	
Work Fax	
Date of Birth / / Spouse	
New Member Signature:	Date://
Date approved by Membership Committee:// Secretary:	
Recruited By:	ID#:

Use this form to add members, delete members or make membership changes. Do not send money with this form. The club will be billed for the \$20.00processing fee. Membership becomes effective as of the date entered at Sertoma headquarters. Send by mail, fax or email.

_ Distribution _

Sertoma headquarters and one copy retained by club.

Form 115 Rev. 11/12