



# Sertoma Membership Application

I hereby submit my application for membership in the

## Round Rock Sertoma Club

PO Box 412

Round Rock, Texas 78680

PERSONAL DATA	MEMBERSHIP DATA
Prefix: _____	Sponsor: _____
First Name: _____	Status: _____
MI: _____	Class: _____
Last Name: _____	Date Submitted: _____
Suffix: _____	<b>CORRESPONDENCE PREFERENCES</b>
DOB: _____	Destination: _____
Street Address: _____	Method: _____
City: _____	<b>SPECIFIC AREAS OF INTEREST</b>
County: _____	(Check all that apply)
State: _____	<input type="checkbox"/> Fund Raising
Zip Code: _____	<input type="checkbox"/> Sponsorship
Home Phone: _____	<input type="checkbox"/> Membership
Mobile Phone: _____	<input type="checkbox"/> Attendance
E-Mail Address: _____	<input type="checkbox"/> Social Committee
Spouse Name: _____	<input type="checkbox"/> Special Events
	<input type="checkbox"/> Publicity
	<input type="checkbox"/> Finances
	<input type="checkbox"/> Newsletter
	Other: _____
	Other: _____
<b>PROFESSIONAL DATA</b>	<b>MEMBERSHIP APPROVALS</b>
Business Name: _____	(Official Club Use Only)
Position Title: _____	Committee: _____
Business Address: _____	Board: _____
Business City: _____	International: _____
Business State: _____	
Business Zip: _____	
Business Phone: _____	
Business E-Mail: _____	
Web Site: _____	

This application is accompanied with a remittance of \$25.00 in payment for the initial membership fee. I understand that I will be responsible for the payment of quarterly dues commencing with the next quarterly billing cycle and I hereby agree to abide by the provisions of the Club Constitution and Club By-Laws.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

After printing and signing, hand deliver this application to your Sertoma Sponsor or mail to the PO Box listed at top of form.