



# Membership Information Form

Club #: \_\_\_\_\_ Club Name: \_\_\_\_\_

PRINTED name of individual completing form: \_\_\_\_\_ Date: \_\_\_\_\_

Please select one of the following:

**Add Member**

- New Member
- Rejoining Club
- Transfer Member

**Delete Member**

- Deceased
- Moved
- Non-Payment of Dues
- Other \_\_\_\_\_

**Change Member Information**

Member ID# \_\_\_\_\_

Dr.  Mr.  Mrs.  Ms.  Miss

(Full Name) \_\_\_\_\_ (Nickname) \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Spouse's name \_\_\_\_\_ Gender \_\_\_\_\_ Ethnicity \_\_\_\_\_

Preferred Address:  Home  Business \_\_\_\_\_  
(company name)

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_  Cell  Home (landline)

Secondary Phone \_\_\_\_\_  Cell  Home (landline)

Email Address \_\_\_\_\_

Occupation \_\_\_\_\_  
(example: doctor, manager, mechanic, retired, etc.)

New Member Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Date approved by Membership Committee \_\_\_/\_\_\_/\_\_\_

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 processing fees. 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.

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