



Rotary Club of the Tarrytowns

Serving the Communities of Sleepy Hollow, Tarrytown and Irvington

MEMBERSHIP INFORMATION & APPLICATION

Requirements of Membership

Prospective members must:

- Hold, or be retired from, a professional, proprietary, executive, or managerial position;
- Meet the club's attendance and community project participation requirements; and
- Be an individual, man or woman, of good character and good professional reputation.

The Membership Process

Often a person being considered for membership is invited by a sponsoring member to attend one or more club meetings to learn more about Rotary. The sponsor may then submit the name of the candidate to the club's membership committee or Board of Directors.

Anyone interested in membership who does not know any local Rotarians should start by reviewing the local club directory of Members & Officers at www.tarrytownrotary.org or contact the Club at the above address. A member of the Club will contact you.

Two levels of membership are offered, Individual and Corporate Membership. The requirements, privileges and responsibilities are the same for both levels. However, Corporate Membership permits the business or organization to designate more than one member so that attendance can be rotated when the Primary Contact Member is unable to attend.

Responsibilities Expectations of Members

Active Participation: Every member is obliged to support the Club's community service activities including fund raising and volunteer service on projects designated by the club. In addition every member is expected to serve on at least one Club hoc committee.

Meeting Times and Place: We meet at the Cooper's Mill, 670 White Plains Road, Tarrytown NY as follows: First Wednesday of Month – No Meeting, Remaining Wednesdays 12:15 Lunch.

Dues Structure: Dues cover dues to Rotary International, monthly subscription to *The Rotarian* magazine and Club administrative costs.

- Pay as you go Dues: Annual dues are \$400. Dues must be paid in full by check payable "The Rotary Club of the Tarrytowns". Each time you come to lunch; you will pay \$25 at the door.
- All Inclusive: dues are \$1000 and includes all lunch meals. Can be paid quarterly, semi-annually or annually.

Attendance: Members can participate in meetings either through attendance at our Club meetings or by attending meetings at other Rotary Clubs throughout the United States and around the world.

Leaves of Absence: Leaves of absence can be granted by approval by the Board of Directors by contacting the Board directly in person or in writing.

Application: Prospective members, Individual and Corporate must complete the membership application and submit it with a check for the dues structure chosen payable to "The Rotary Club of the Tarrytowns" The Board will review and respond to the application within 30 days.



Rotary Club of the Tarrytowns

Serving the Communities of Sleepy Hollow, Tarrytown and Irvington
P.O. Box 2, Tarrytown, NY 10591

MEMBERSHIP APPLICATION

"Pay as you Go"

Please complete and return by mail to the above address or personally to the Club Secretary or President with a check in the amount of \$300 payable to "The Rotary Club of the Tarrytowns".

PERSONAL INFORMATION (To be completed for Individual Membership & Corporate Member's Primary Contact):

Name _____ Nickname _____

Home Address _____

Home Phone _____ Date of Birth _____ Fax _____

Cell Phone _____ Email _____

Languages able to read and/or speak _____

BUSINESS INFORMATION:

Name of Company
or Organization _____

Address _____

Position _____ Title _____

Work Phone _____ ext _____ Fax _____ Work Email _____

Pager _____

FAMILY INFORMATION:

Spouse's Name _____ Anniversary: _____

Your Birthday (month/day) _____ Spouse's Birthday _____

Children (names and birth date) _____

BILLING INFORMATION: _____ my check for \$300.00 to cover Annual Dues is enclosed.

Preferred Billing Address: _____ Office _____ Home _____

ROTARY INFORMATION:

Sponsor's Name: _____ Applicant's Signature _____ Date _____

Please indicate on the back of this application information regarding any other Rotary Club affiliations including dates of membership, offices held, etc.

I wish to apply for a CORPORATE MEMBERSHIP. I have completed page 2 of the application.



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MEMBERSHIP APPLICATION

"All Inclusive"

Please complete and return by mail to the above address or personally to the Club Secretary or President with a check in the amount of \$1,000 (annual), \$500 (semi-annual) or \$250 (quarterly) payable to "The Rotary Club of the Tarrytowns".

PERSONAL INFORMATION (To be completed for Individual Membership & Corporate Member's Primary Contact):

Name _____ Nickname _____

Home Address _____

Home Phone _____ Fax _____

Cell Phone _____ Email _____

Languages able to read and/or speak _____

BUSINESS INFORMATION:

Name of Company
or Organization _____

Address _____

Position _____ Title _____

Work Phone _____ ext _____ Fax _____ Work Email _____

Pager _____

FAMILY INFORMATION:

Spouse's Name _____ Anniversary: _____

Your Birthday (month/day) _____ Spouse's Birthday _____

Children (names and birth date) _____

BILLING INFORMATION: my check for \$ _____ to cover dues payment schedule chosen

Preferred Billing Address: _____ Office _____ Home _____

I wish to apply for a **CORPORATE MEMBERSHIP**. I have completed page 2 of the application.

ROTARY INFORMATION:

Sponsor's Name: _____ Applicant's Signature _____ Date _____

Please indicate on the back of this application information regarding any other Rotary Club affiliations including dates of membership, offices held, etc.

Rotary Club of the Tarrytowns

CORPORATE MEMBERSHIP APPLICATION INFORMATION

The Primary Contact Member is to complete the following information for each person who may attend Rotary Club meetings as the representative of the company or organization. This information is to be submitted with page 1 of the application.

BUSINESS INFORMATION (as it appears on page 1 of the application):

Name of Company
or Organization _____

Name of Primary Contact _____

Please complete the following information for each person who is a potential attendee at Rotary meetings as a representative of the company or organization.

Name _____ Nickname _____

Position _____ Title _____

Work Phone ___ ext _____ Fax _____ Home Phone _____

_____ Cell Phone _____ Email _____

_____ Pager _____ Languages able to read and/or speak _____

Name _____ Nickname _____

Position _____ Title _____

Work Phone ___ ext _____ Fax _____ Home Phone _____

_____ Cell Phone _____ Email _____

_____ Pager _____ Languages able to read and/or speak _____

Name _____ Nickname _____

Position _____ Title _____

Work Phone ___ ext _____ Fax _____ Home Phone _____

_____ Cell Phone _____ Email _____

_____ Pager _____ Languages able to read and/or speak _____

Please use the back of this page or additional pages as necessary to list potential representative attendees.