



Minot Sertoma Club Membership Application

I hereby make application for membership in the Minot Sertoma Club. I accept and subscribe to the provisions of the Club Constitution and By-Laws.

Applicant (last, first, MI) _____

Business Name: _____

Title: _____

Business Phone: _____ Mobile Phone: _____

Email Address: _____

Please send correspondence to my: Business: _____ Residence: _____

Applicant's date of birth: _____ Spouse Name: _____

Business Address: _____

Residential Address: _____

Do you belong to any other service club? _____ If so, state name _____

Applicant Signature: _____ Date: _____

TYPE OF MEMBERSHIP

Charter Associate

Active Transfer/Life

Transfer Reinstated/Life

Reinstated Corporate

This application is recommended by Sertoman: _____ Date: _____

Approved by Classification and/or Membership Committee (if applicable)

Approved by Club Board of Directors

Date: _____

Signed: _____ (Secretary)

Membership applications can be brought to a Monday meeting or mailed to: Minot Sertoma Club PO Box 1183 Minot, ND 58702