



Zonta International  
Zonta Club of the Black Hills

**Membership and Classification Committee**  
**PROPOSED MEMBER FORM**  
**2018**

*Proposed members must be approved by the board of directors before they are invited to join.*

Name: \_\_\_\_\_ birthdate \_\_\_\_\_

Home Address: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Check One: I prefer to be contacted by Cell \_\_\_ Business Phone \_\_\_ Home Phone \_\_\_ Email \_\_\_

Preferred Mailing Address: Home \_\_\_ Business \_\_\_

Firm or Institution: \_\_\_\_\_

Business Address: \_\_\_\_\_ ZIP: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Business or Profession: \_\_\_\_\_

Check One: Owner \_\_\_ Partner \_\_\_ Employee \_\_\_

Position or Title with firm: \_\_\_\_\_

Approximate length of time in this position: \_\_\_\_\_ Number of hours per week: \_\_\_\_\_

Club Affiliations: \_\_\_\_\_

I am willing to commit time to advocacy and service projects in my community.

I am willing to contribute financially to and raise money for local & international projects that benefit women.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Email form to : [kfolsom@voanr.org](mailto:kfolsom@voanr.org)

**ACTION REGARDING THE PROPOSED MEMBER**

*To be completed by Membership and Classification Committee*

Classification \_\_\_\_\_ Code \_\_\_\_\_

Membership Committee:  Eligible  Not Eligible at this time Date \_\_\_\_\_

Board Approval \_\_\_\_\_ Announce in Newsletter \_\_\_\_\_ Letter of Invitation \_\_\_\_\_

Dues Received \$ \_\_\_\_\_ Name Tag Ordered \_\_\_\_\_ Picked Up \_\_\_\_\_

Dues Sent: International \_\_\_\_\_ District Treasurer \_\_\_\_\_

Initiation Date \_\_\_\_\_ Committee Assignment \_\_\_\_\_ Chair Notified \_\_\_\_\_

New Member Received: Directory \_\_\_\_\_ Manual \_\_\_\_\_ Name Tag \_\_\_\_\_ Yellow Rose \_\_\_\_\_