



Zonta International
Zonta Club of the Black Hills

Membership and Classification Committee
PROPOSED MEMBER FORM

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

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 _____