

Rotaract Club of City Heights Membership Application 2021-2022

Submit form and send PayPal payment to chrotaractfinance@gmail.com

(All new and returning members must fill out a new form)

Rotaract Club of City Heights 4305 University Ave., Suite 600 San Diego, CA 92105

Membership Dues:

Printed Name

1 year (July 1 st to June 30 th)			Membership Dues (includes t-shirt for new members only)			\$25.00
		Club Polo (optional)			\$20.00	
			Additional T-shirt (optional)			\$10.00
					Fotal	\$
Member Information	on:					
Last Name:	First N		e:	Middle I	Name:	
Name you go by:		DOB:		-	Age:	
Address:			State:	State:		
Email:				Phone: ()_	
Connection to the Ci	ity Heights	community:	·			
Merchandise Order	r (circle siz	ze):				
Unisex T-Shirt	S	M	L	XL	2XI	_
Men's Polo	S	M	L	XL	2XI	_
Women's Polo	S	M	L	XL	2XI	_
I, hereby, agree to the read and reviewed the dues. The Membersh	ne bylaws a nip Dues of	and agree to a	accept full res	ponsibility for payi	ng the	membership
Member's Signature						

For Treasurer use only:	Received by:	Date form received:
Cash, Check, Card or PayPal (Circle one)	Amount Paid:	Date payment received: