



# Altrusa International of \_\_\_\_\_

## Recommendation for Membership

Name \_\_\_\_\_

Home address \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Would you prefer to be contacted at: Home Work Cell (please check one)

E-mail address \_\_\_\_\_

Other club/organization affiliations:

Why do you want to join Altrusa?

Birthday \_\_\_\_\_  
Month Day Year

Profession/Occupation \_\_\_\_\_

How do you want to receive your publications Hard Copy Electronically

Sponsor Name \_\_\_\_\_

Sponsor's ID# \_\_\_\_\_

Co-Sponsor \_\_\_\_\_

Co-Sponsor's ID# \_\_\_\_\_

Date Initiated \_\_\_\_\_

### Membership Committee Area:

### Altrusa Board

Approved

Not approved

Date \_\_\_\_\_

Initial \_\_\_\_\_

Approved

Not approved

Date \_\_\_\_\_

Initial \_\_\_\_\_