



# Sertoma Club of Kansas City Membership Application



I hereby make application for membership in the Kansas City Sertoma Club.

Mr. Ms. \_\_\_\_\_  
(First Name) (MI) (Last Name)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone #s: \_\_\_\_\_  
( ) Residence ( ) Business ( ) Cell (Voice Only) (Text Only) (Voice or Text)

Other: \_\_\_\_\_  
(Personal Email Address) (Date of Birth) mm/dd/yy (Spouse Name)

Business Info: \_\_\_\_\_  
(Name of Business) (Position or Title)

Business Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Business Website: \_\_\_\_\_  
(Business Website) (Business Email Address)

Please check the manner in which you would like to receive correspondence:

Business Residence

Please check the manner in which you would like to connect to the club calendar:

Google Calendar Outlook Calendar

This application is accompanied by \$25.00 in payment of the membership fee. I understand I will be responsible for dues of \$45.00 per month and agree to abide by the provisions of the Bylaws and Policy Statements.

I submit the following payment information and give permission to the Sertoma Club of Kansas City to charge my fees and dues to the credit/debit card below, now and in the future until I provide alternate financial information.

MasterCard Visa

Card Number# \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expires \_\_\_\_\_ Security Code \_\_\_\_\_  
(mm/yy)

PHOTOGRAPH RELEASE AND AUTHORITY - Subject hereby releases SERTOMA and any associates, as well as any assignees, from any and all claims for damages for liable, slander, invasion of privacy or any other claim based on the photo release in the club manual or other publications.

\_\_\_\_\_  
(Date) mm/dd/yy

\_\_\_\_\_  
(Applicant's Signature)

Recruited By: \_\_\_\_\_

Date: \_\_\_\_\_  
(mm/dd/yy)

Approved by Membership Committee (If applicable)  
\_\_\_\_\_

Approved by Club Board of Directors:

Date: \_\_\_\_\_  
(mm/dd/yy)

Signed: \_\_\_\_\_  
Secretary