

Prospective Member Questionnaire Form

Membership in a Zonta Club is by invitation. Members are actively engaged in supporting and implementing the mission of the organization and have experience in a decision-making capacity in a recognized business or profession.

If you meet this criteria and are interested in becoming a member of the Zonta Club of Melbourne, please complete the following information and submit application to P.O. Box 417, Melbourne, Florida 32902-0417 or to any club member. For more information, contact Membership Committee, Sandy Michelson at 321-729-0755 or email zontaclub.melbourne.fl@gmail.com. We look forward to your membership!

First Name:	Last Name:		
Occupation / profession:	Job/Position Title:		_
Firm or Institution Name:			
I am: Owner Partner I am active or have been previously active in th I am willing to commit time to service and advor I am willing to contribute financially to and raise	cacy projects in my comm	unity: Yes	No No Pin: No
Business Address:			
Residence Address:			_
City: State/Province:	Zip Code:	Country:	_
Telephone Number (residence):	(business):	-	_
Date of Birth:	E-mail:		
Spouse/Partner Name:			
Please contact me by: Phone (residence Best time to contact me is: Morning A		🗌 E-mail 🗌 Fax 🗌 Mail	
I heard about Zonta International through: A A current Zonta member Local Zonta Internet search engine Newspaper /	club Website 🛛 Zonta In	ternational Website	
Comments:			
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Signature	Date		