

PROSPECTIVE MEMBER QUESTIONNAIRE FORM

1. Basic Information	
First name: Street address: Postal code: Telephone:	Last name/Surname: City: Country: Languages Spoken:
Date of Birth (dd/mm/yyyy):	Email address for Zonta communication:
2. History of previous or current men	nbership in Zonta (if any) or other Service Clubs:
3. Occupation or Profession, Position Title: 4. Hobbies & Interests:	
6. How did you hear of Zonta Club of	Fredericksburg / Zonta International?
I am familiar with Zonta International	and would like to join the Club of Fredericksburg.
I commit myself to the mission, purpo	rse, and principles of Zonta International. Yes or No nnual dues today, and annually by April 30th. Yes or No
Member Candidate Signature	Date
Sponsor/Recruiter Signature	Date
	Signature of Membership Chair
Submitted to District & ZI	Date. Signature of Treasurer