



# ROGUE RIVER VALLEY UNIVERSITY CLUB

PO Box 616, Medford OR 97501

## Personal Membership Application

### Section 1: To be completed by the Personal Member Applicant(s)

Application for 1 Member only, **OR**

Application for 2 Members — Applicant and Spouse or Spousal Equivalent

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

Colleges/Universities Attended: \_\_\_\_\_ Years: \_\_\_\_\_

\_\_\_\_\_ Years: \_\_\_\_\_

### Section 2A: Spouse's/Spousal Equivalent's Name (Non-Voting Member)

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

Colleges/Universities Attended: \_\_\_\_\_ Years: \_\_\_\_\_

\_\_\_\_\_ Years: \_\_\_\_\_

## Section 2: To be completed by the 2 Club Members/Sponsors

Club member sponsors:

(1): \_\_\_\_\_

Signature

(2): \_\_\_\_\_

Signature

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

*Sponsors are to submit the completed application to a member of the Board of Trustees for the full Board's review and approval.*

*Application for membership shall be posted at the University Club for 2 weeks on set forth in the bylaws. Members wishing to make any comment regarding the above applicant shall communicate with a member of the Membership Committee or a member of the Board of Trustees prior to the expiration of the 2 week review period.*

***For Club Use Only:***

Date Received: \_\_\_\_\_

Date Posted at Club: \_\_\_\_\_

Date Approved: \_\_\_\_\_

Signature of President: \_\_\_\_\_

