



Toastmasters Membership Application

CLUBS WITHIN DISTRICTS

For faster service,
add and pay for your
new members online

Club Number:

District Number:

Month / Year Joined: /

Club Name: _____ City: _____

Membership Type:

- New
- Reinstated (break in membership)
- Renewing (no break in membership)
- Dual
- Transfer from club number / name

Member # (if known)

LAST NAME / SURNAME / FAMILY NAME:

FIRST NAME / GIVEN NAME:

MIDDLE INITIAL / NAME:

OTHER ADDRESS INFO (FLOOR NUMBER, BUILDING NUMBER, MAIL STOP):

ADDRESS LINE 1 (APARTMENT OR SUITE NUMBER):

ADDRESS LINE 2 (HOUSE / BUILDING NUMBER, STREET NAME):

CITY:

STATE / PROVINCE:

- MALE
- FEMALE

COUNTRY:

ZIP / POSTAL CODE:

HOME PHONE NUMBER:

CELL PHONE NUMBER:

WORK PHONE NUMBER:

FAX NUMBER:

E-MAIL: _____

New Member Kit preference for new members only:

- English
- French
- Spanish
- Japanese
- Chinese (Traditional)
- Chinese (Simplified)
- German
- Cassette Tape
(visually impaired only)

Selected materials in the new member kit are available in English only.

Please do not send promotions to me from Toastmasters International's partners.

NEW/REINSTATED/DUAL MEMBER SPONSOR: The person who recruited and/or encouraged the member to join.

NOTE: TO ENSURE PROPER CREDIT, THE SPONSOR'S FULL FIRST AND LAST NAME AND HOME CLUB NUMBER MUST APPEAR.

LAST NAME / SURNAME / FAMILY NAME:

FIRST NAME / GIVEN NAME:

MIDDLE INITIAL / NAME:

SPONSOR'S DISTRICT NUMBER:

SPONSOR'S HOME CLUB NUMBER:

MEMBER NUMBER (if known)

PLEASE READ AND COMPLETE THE OTHER SIDE

