



# The Fellowship of Rotarian Magicians (FORM)

## Membership Application and Information Request

Please fill out this application and return it to our Secretary, Jim Lang, 24 Primrose Dr, Trumbull, CT 06611, USA. If you are a prospective member or have not paid your dues for the current year, enclose \$25 USA. Dues are used for mailing, administrative, and Fellowship meeting costs only. Officers receive no compensation for their services.

**Fields marked with '\*\*' are required.**

First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_

Home Street Address\* \_\_\_\_\_

City\* \_\_\_\_\_ State/Province\* \_\_\_\_\_

Postal Code \_\_\_\_\_ Country\* \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone\* \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_

Type Magician (Professional/Semi-Pro, Hobby, Collector, Dealer)\* \_\_\_\_\_

IBM Ring # \_\_\_\_\_ SAM Assembly # \_\_\_\_\_ Started in Magic (yyyy) \_\_\_\_\_

Stage Name \_\_\_\_\_

Rotary Club/City/Country\* \_\_\_\_\_

Rotarian #\* \_\_\_\_\_ Club #\* \_\_\_\_\_ District #\* \_\_\_\_\_ Rotarian since (yyyy) \_\_\_\_\_

Have you ever attended a Rotary International Convention? \_\_\_\_\_

Company Name \_\_\_\_\_ Title \_\_\_\_\_

Work Street Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Work Phone \_\_\_\_\_ Extension \_\_\_\_\_

Fax Number \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Home Page \_\_\_\_\_

Please write any additional comments, including magic associations, on the back of this form.